



# UCP Heartland Volunteer Application

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Day Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Evening Phone: ( \_\_\_\_\_ ) \_\_\_\_\_

Email: \_\_\_\_\_

\_\_\_\_ Yes, please sign me up to receive a monthly e-newsletter from UCP Heartland.  
I understand my email address will be kept private and that I can opt out at anytime.

\_\_\_\_ No, please do not sign me up to receive a monthly e-newsletter from UCP Heartland.

### Educational Background

Check highest level completed:

Elementary/Jr. High Diploma	_____	High School Diploma	_____
Associate's/Technical Degree	_____	Undergraduate degree	_____
Masters degree or higher	_____		

Describe any specialized training: \_\_\_\_\_

If in high school or college:

Name of School: \_\_\_\_\_

Year you graduate: \_\_\_\_\_ Major: \_\_\_\_\_

Are you volunteering to fulfill a service requirement or to receive credit? \_\_\_\_ Yes \_\_\_\_ No

If yes, explain. \_\_\_\_\_

### Employment – If currently employed

Employer: \_\_\_\_\_ Title: \_\_\_\_\_

Please answer the following questions to help us better understand your volunteer interests.

Please list any volunteer positions, responsibilities and supervisors: \_\_\_\_\_

\_\_\_\_\_

What amount of time do you want to contribute? \_\_\_\_\_

What is your availability? \_\_\_\_\_

What hobbies and skills do you have that may be useful in our programs? \_\_\_\_\_

\_\_\_\_\_

Why are you volunteering at this time? \_\_\_\_\_

\_\_\_\_\_

What do you hope to gain from a volunteer experience? \_\_\_\_\_

\_\_\_\_\_

How did you learn about UCP volunteer opportunities? \_\_\_\_\_

\_\_\_\_\_

Which program(s) are you interested in volunteering for and why? \_\_\_\_\_

\_\_\_\_\_

Please provide three references (business or previous volunteer supervisor preferred)

Name	Phone #	Occupation
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Name	Phone #	Occupation
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Name	Phone #	Occupation
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In case of emergency, please notify: \_\_\_\_\_

Name

Phone #

I understand that if I accept a volunteer position with UCP Heartland, I may not accept payment for my services. I am also willing to participate in all required training and complete all required forms as designated.

UCP Heartland has my permission to share the information on this application with any prospective employer or, in case of emergency, to notify my emergency contact.

UCP Heartland has my permission to photograph/videotape me while I am volunteering at events or if I am with consumers or in the office volunteering for the purpose of marketing UCP Heartland and volunteer programs and projects and that my photo or likeness may be included on the website, in printed or online newsletters, in press releases or on volunteer brochures. I understand that I will not be compensated for use of my likeness or photo.

I understand all information submitted within this application will be held in confidence according to the personnel policies of UCP Heartland. I further understand that an interview with UCP does not guarantee placement within their volunteer programs.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**If 16 years of age or younger parental permission is required:**

Parent/guardian Name: \_\_\_\_\_

Emergency Contact (Name & Phone): \_\_\_\_\_

I give my permission for my son/daughter to volunteer with UCP Heartland.

\_\_\_\_\_  
Parent Guardian Signature

\_\_\_\_\_  
Date

Please return completed Volunteer Application to:

UCP Heartland  
Attn: Director of Development/Marketing  
13975 Manchester Road  
St. Louis, MO 63011

Or by email to: [schuek@ucpheartland.org](mailto:schuek@ucpheartland.org)

