

Program Specialist Application

CONTACT INFORMATION Last Name: First name: Address: State: Zip Code: City: Cell Phone: Home Phone: E-mail Address: Employer: Employer Address: **EMERGENCY CONTACT INFORMATION** Phone: Name: **LOCATION** Camp Wakonda (Campers 8-11 Years Old) **GENERAL QUESTIONS:** 1. Have you ever been convicted of a crime? YES NO If so, please explain: 2. Have you volunteered with other organizations? YES NO Please describe your experience: 3. Please indicate your availability: Weekdays □ Weekends If you selected weekdays, please indicate availability below. Monday Tuesday □ Wednesday □ Thursday □ Friday 9am-12pm □ 2am-2pm □ 2am-4pm □ 5pm–7pm □ 4. Are you fluent in any language other than English? YES □ Which languages are you fluent in? Are you willing to act as a translator / ESL tutor? YES

Volunteers are required to disclose any convictions in this State or any other jurisdiction. Prior convictions will not necessarily bar them from volunteering. Information will be kept in the strictest confidence within Homes for the Homeless. Volunteers approval is at the discretion of HFH.



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Please describe your special skill or talent. Please include in your description your years of activity using your skill o
talent, any relevant work experience in which you may have used your talent or skill, accreditations, licenses, etc.
Please describe the activity or project that you are proposing; be as specific as possible. Please do not forget to
include in your description things like: length of time to complete the activity, if the activity will require multiple
sessions how many, specific equipment and materials that will be used, and who will be providing these items, etc.
In what way do you envision this activity or project enriching the lives of our campers?