

Camp Shiloh

Volunteer Info Sheet

Personal Info:

Name _____

Address _____

Cell Phone _____ Home Phone _____

Email _____

Birthday _____ Social Security # _____

Emergency Contact:

Name _____ Phone _____

Physical Limitations/Allergies we should be aware of _____

References: (1 relative, 2 non-relative)

Name _____ Phone _____

Name _____ Phone _____

Name _____ Phone _____

Have you volunteered in the past?

Job Position _____ Supervisor _____ Phone _____

When are you available?

Year Round ___ Summer ___ Weekends ___ Weekdays ___ Days ___ Nights ___

What position are you considering?

Foodservice ___ Housekeeping ___ Adventure Course ___ Buildings/Grounds ___ Maintenance ___

Special Interests/Hobbies _____

Certifications/Qualifications _____

Why would you like to volunteer at Camp Shiloh? _____

Would you be open to a background check? Yes ___ No ___

On the back of this page, please describe your personal Life Testimony