**VOLUNTEER APPLICATION FORM**

**KFAM AFFI**

<table>
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<tr>
<th>Application Date</th>
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<tbody>
<tr>
<td>Name</td>
</tr>
<tr>
<td>Gender</td>
</tr>
<tr>
<td>____Female</td>
</tr>
<tr>
<td>Address</td>
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<tr>
<td>Email Address</td>
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<td>How did you hear about KFAM?</td>
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**In What Areas Are You Interested in Volunteering?**
(Please check all that apply.)

- ____ No Preference
- ____ Events
- ____ Tutor
- ____ Mentor
- ____ Child Care Provider
- ____ Transportation Provider
- ____ Visitation Monitor
- ____ Administrative/Organizational Projects
- ____ Other

**Languages**

<table>
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<tr>
<th>English</th>
<th>Korean</th>
<th>Mandarin</th>
<th>Cantonese</th>
<th>Other</th>
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**Why do you wish to volunteer with us?**
Please describe your prior volunteer experience, if any.

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<th>Fields or Areas of Experience/Expertise: Please share your occupational backgrounds</th>
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Currently Employed?  _____ Yes  _____ No

Preferred length of commitment:
- ____ 3 months
- ____ 6 months
- ____ 6 months - 1 year (or more)
- ____ Unknown

Hours of Availability
Please provide specific days of the week, if known.

- ____ Monday: _____ to _____  ____ Tuesday: _____ to _____
- ____ Wednesday: _____ to _____  ____ Thursday: _____ to _____
- ____ Friday: _____ to _____  ____ Saturday: _____ to _____

Or: I don’t know exactly which days I would be working but I would like to commit to:
- _____ hours per week  _____ hours per month

Additional Requirements: Depending on the type and length of volunteering, federal law may require background screenings and TB testing for volunteers who are 21 years of age and working directly with youth.

STAFF USE ONLY:
- Live Scan _______  TB Test _______  Orientation _______  Drive Record/Car _______