



## Volunteer Application Form

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

D.O.B. \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Physical Limitations: \_\_\_\_\_ Occupation: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone Number: \_\_\_\_\_

- TANF/GA/DHS (assigned number of hours)
- Housing Authority (assigned number of hours)
- Learn 2 Earn (Hours volunteered for store credit)
- Volunteer (no assigned hours from an organization or store credit given)

### Rules, Policies, and Guidelines

- No illegal substances or alcohol permitted on premises. We reserve the right to test for reasonable suspicion.
- Smoking is only in designated areas and only with permission from management.
- 30 minute lunch break permitted (DOES NOT COUNT TOWARD HOURS) must sign out for lunch.
- You are responsible to complete your hours in the time given. No special privileges will be given.
- Friend/Family are NOT allowed to do hours for you.
- All applicants must comply with the orders given by management or team lead.

Applicants fall under the authority of the Director of Community Services with day to day operations and guidelines given by the store manager.

By signing below the applicant has knowledge that he/she has read the guidelines and understand the guidelines, steps, and expectations as a volunteer. The applicant will agree and comply with said guidelines in the volunteer program. It is also understood that if conduct, behavior, and/or work ethic does not meet expectations the management has the authority to terminate the involvement of the volunteer.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Director of Community Service

Approved: Y / N

**\*\*ID REQUIRED\*\***

Reason: \_\_\_\_\_

The HOPE Chest of Pekin, a 501-c-3 Organization

