

Date: _____

2016 10th USAIHC Volunteer Application

Please complete all information and return to harpcomp@indiana.edu or
USAIHC, P.O. Box 5008, Bloomington, IN 47407:

Name: _____ Nickname: _____

Gender (check one): Female Male Date of Birth: ____/____/____

Home Address: _____

Home Phone Number: _____

Cell Phone Number: _____

E-mail Address: _____

Emergency Notification (Name): _____

Emergency Contact Phone/Cell Number: _____ Relationship to You: _____

Parent Information (Must be supplied if less than 21 years of age):

Name of Parent or Legal Guardian: _____

Address (if different than above): _____

Phone/Cell Number: _____ Phone Number (work): _____

Are your parent(s)/guardian aware of your volunteer intentions? Yes No

Schedule Preference:

Days Available to Work: Monday Tuesday Wednesday Thursday Friday
Saturday Sunday

Time Preference: Day (9-12) Afternoon (12-3) Evening (3-6) Night (6-9)

Skills (Please indicate with a check mark):

Computer Courier Data Entry Filing Graphic Arts Greeter
Information Desk Money Handling Record Updating Research Translation

General Information:

All applicants will be subject to a background check before they are permitted to volunteer

Indicate any allergies, health conditions or physical limitations: _____

Do you speak a language other than English? If yes, identify language(s):

Are you able to furnish directions to various locations in Bloomington? Yes ___ No ___

Have you ever been convicted of a crime other than a minor traffic violation? Yes ___ No ___

(Note: Convicted means you were declared guilty by a judge or you pleaded guilty in court. A conviction may have even taken place if you did not pay a fine or spend time in jail or in prison. A conviction could have been for either a misdemeanor or a felony. For USAIHC purposes, driving while under the influence, driving on a suspended license, reckless driving, leaving the scene of an accident, and vehicular homicide are not minor traffic violations and must be declared (whether the result is a ticket or a more severe penalty). Minor traffic violations that result in tickets do not need to be declared. Answering yes to this question does not automatically disqualify you to volunteer; however, information obtained from the background check will be used in the review process.)

If convicted, indicate when and explain: _____

Are you employed? Yes ___ No ___ If yes, indicate where: _____

Organizations that you are currently involved in: _____

Are you or is anyone in your family a harpist? _____

How did you learn about USAIHC volunteer needs?

Do you know anyone who has hosted a contestant in prior years? If yes, identify prior host(s):

At every stage of the Competition, contestants are eliminated. How do you assess your current “comforting” skills? _____

Special Requests: _____

Is there anything else you’d like us to know about you?

Please indicate two references that we may contact; exclude relatives and your guidance counselor.

References:

Name: _____ Relationship to you: _____

Phone/cell Number: _____

Name: _____ Relationship to you: _____

Phone/cell Number: _____

I certify that all information provided in my application material is true. I understand that any false statement made herein is sufficient reason for rejection of this application. Disclosure of convictions within this application does not automatically disqualify me from volunteering; however, information obtained from the background check will be used in the review process. I have carefully read and understand this statement and, by my signature below, note such.

Signature: _____ Date: _____

Form update: 3/24/16