



**AGENCY VOLUNTEER APPLICATION**

**Please fill out this form as completely as possible.**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

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

HOME PHONE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

BIRTHDATE: \_\_\_\_\_ HOW LONG IN OMAHA? \_\_\_\_\_

Please number in order of interest the areas to provide Volunteer Services (i.e. 1 next to your top choice, etc.):

- |  |   |
|--|---|
| <input type="checkbox"/> Administration (receptionist or data entry) | <input type="checkbox"/> Facilities Maintenance   |
| <input type="checkbox"/> Advocacy                                    | <input type="checkbox"/> Grant Writing / Research |
| <input type="checkbox"/> Clothing Closet                             | <input type="checkbox"/> Hotline Training         |
| <input type="checkbox"/> Computer Lab (staffing)                     | <input type="checkbox"/> Mentoring                |
| <input type="checkbox"/> Education Specialist                        | <input type="checkbox"/> YW Partners Guild        |
| <input type="checkbox"/> Empower Clinic                              |   |

**Due to the sensitive nature of our agency work and responsibilities, all volunteer opportunities require YWCA ~ Omaha conduct a background check.**

Other than Hotline Volunteers, please indicate the hours between 8am-8pm next to the day(s) that you are available:

\_\_\_\_\_ Mon \_\_\_\_\_ Tues \_\_\_\_\_ Wed \_\_\_\_\_ Thu \_\_\_\_\_ Fri

FORMAL EDUCATION (Indicate highest level completed)

Some High-School     High School Diploma     Some College Years attended?  
 Associate Degree     Bachelor's Degree     Master's Degree     Post-Graduate

If you have completed post-secondary education, what was your major area of study?

List any special skills and/or training you may have that you are willing to share as it relates to services offered by the YWCA Omaha:

Are you fluent in a foreign language?     YES     NO

If YES, please specify language(s): \_\_\_\_\_



Briefly explain your interest in volunteerism as it relates to opportunities available through the YWCA Omaha:

What is your personal belief or experiences as it relates to Domestic Violence or Sexual Assault?

How did you learn of YWCA Omaha programs and services?

- Television   
  Radio   
  Personal Experience   
  Friend   
  Church Bulletin  
 Newspaper   
  Former / Current Volunteer   
  Corporate / Organizational Newsletter  
 Other (specify): \_\_\_\_\_

I hereby acknowledge that I have read, understand, and meet the requirements listed above. I wish to be considered as a volunteer within the YWCA Omaha Programs.

I will make every effort to attend required training classes. If circumstances beyond my control prevent me from attending training or cause me to be unable to complete my scheduled volunteer

If I do not complete any specified volunteer training, I understand that I am expected to return all training materials promptly.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Email application to: [info@ywcaomaha.org](mailto:info@ywcaomaha.org)

**or Mail: YWCA Omaha**  
**Attn: Volunteer Program**  
**222 South 29<sup>th</sup> Street**  
**Omaha, NE 68131**

Thank you for your interest!