

Welcome to Noah's dedicated and caring team of Volunteers!

Thank you for your interest in volunteering for Noah's Ark of Central Florida. We welcome your interest, time and talents and believe you will find your experience with us to be quite rewarding. There are so many ways you can serve: crafts, games, sports and fitness, landscaping, music, cooking, academics, and on and on. We look forward to meeting you and joining with you in serving our community of people with developmental disabilities.

Today's Date: _____/_____/_____

Volunteer Information

Volunteer's Name: _____

Cell Phone Number: (____) _____

Home Phone Number: (____) _____

Best time to call: _____

Email Address: _____

Street Address: _____

City: _____ State: _____ ZIP Code: _____

Volunteer's Birthdate (*Volunteers must be 18 years or older*): _____

References (please provide two)

References can be personal/character, work related, or volunteer related, but not a relative.)

1. _____ (____) _____
Name of first reference Phone number of first reference

What is your relationship to reference?
(i.e. work associate, community organization, etc.) _____

2. _____ (____) _____
Name of second reference Phone number of second reference

What is your relationship to reference?
(i.e. work associate, community organization, etc.) _____

Volunteer Welcome & Orientation Training Session

Once your application is received and reviewed, you will be contacted by a Noah's Ark staff or volunteer to set up a training session. At this session, you will receive a packet of information to review and/or complete. Click the box below if you agree to attend a Volunteer Welcome & Orientation Training Session. We welcome and value your participation.

_____ I agree to attend a Volunteer Welcome & Orientation training session. I will provide my photo ID (i.e. Driver's License) and complete a packet of essential forms and releases prior to beginning my volunteer services.

Background Check and Fingerprinting

All applicants who plan to work directly with the individuals we serve must be over 18 and complete and pass a background check and fingerprinting (Level 2 Background Screening by local, FDLE, and FBI law enforcement). Click the box below if you agree to have a background check and fingerprinting completed.

_____ I agree to obtain and submit a Level 2 Background Check and Fingerprinting to Noah's Ark of Central Florida as a condition of acceptance as a volunteer and that unsatisfactory results or refusal to cooperate will cause removal of my application.

Representations and Release

Click the box below if you agree to the Representations and Release statement below.

_____ I certify that all the information in this application is accurate. I authorize Noah's Ark to verify all the information in this application and to contact any references and any others that may have information about my character and fitness for working with adults with developmental or intellectual disabilities.

_____ **The information I provided in this application is accurate and complete.**

Signature

Today's Date:

**Thank you for your application to volunteer at Noah's Ark.
We look forward to serving with you.**

Please print, sign, and mail to:
Noah's Ark of Central Florida
Volunteer Coordinator
500 Inspiration Dr.,
Lakeland, FL 33805