



Parents, Let's Unite for Kids (PLUK) Volunteer/Work-Study Application

<p>Name: _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Last First Middle </div> </p> <p>Mailing Address: _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Number Street Apt </div> <hr/> <div style="display: flex; justify-content: space-between; width: 100%;"> City State Zip </div> </p> <p>Date of Birth _____</p> <p>Phone: home _____ work _____ cell _____ e-mail _____</p> <p>Occupation: _____</p> <p>Employer: _____ <hr/> <div style="display: flex; justify-content: space-between; width: 100%;"> Phone Number Address </div> </p> <p>Emergency Contact: _____ <div style="display: flex; justify-content: space-between; width: 100%;"> Name Phone Number Relationship to you </div> </p>	<p style="text-align: center; margin: 0;">For Office Use Only</p> <p>Received _____</p> <p>References checked _____</p> <p>Remarks _____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Date Started _____</p>
---	--

Volunteer position(s) you are interested in

Parent-to-Parent Volunteer
 Special Events Volunteer
 Other
 Office Assistant
 Kid's Group
 Computer Assistant
 Tutoring

 Montana Families Speak

Please list Two Non-Related References

Name	Relationship	Address and Phone Number
1) _____	_____	_____
2) _____	_____	_____

K'i'v' g't' e' p' l' h' i' g' t' l' o' c' v' a' p' l' y' g' l' i' j' q' w' f' ' h' p' q' v' . ' l' w' e' j' ' e' u' l' t' g' x' k' w' u' e' t' l' o' l' p' c' r' e' q' p' x' e' v' k' p' u' l' t' ' j' k' w' q' t' { ' h' i' l' w' d' u' n' c' p' e' g' ' e' d' w' u' g' A
(Please note that your answers DO NOT necessarily mean that you application will be rejected, but non-disclosure can be grounds for termination.)

Please Read Before Signing:

- I understand that:
- The Information that I have provided may be verified, and I give permission to PLUK to make inquiry of others, which may include a criminal background check to determine my suitability to act as a PLUK volunteer.
 - In the course of volunteering for PLUK, I may be dealing with confidential information and I agree to keep such information in the strictest of confidence.
 - The relationship between PLUK and volunteers is an "at will" arrangement, and that it may be terminated at any time without cause by either the volunteer or PLUK.
 - I grant PLUK permission to use my likeness, voice, and words in television, radio, film, or in any form to promote activities of PLUK

I affirm that I have read the above and that the information I have given is true and complete.

Signed _____ Date _____

Signature of Parent or Guardian if volunteer is a Minor _____ Date _____