



4352 Independence St.
Avon Park, Florida 33825

VOLUNTEER APPLICATION

NAME: _____ DATE: _____

ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ EMAIL: _____

Ridge Area Arc offers a wide variety of volunteer opportunities. Please indicate the areas that you are interested in working in. Circle your choices below.

Working with: Adults 16+ Seniors

Working in: (circle preference)

Adult Day Training Center	Group Home	Resale Store	Special STARS
Office Duties	Special Events	Maintenance	

Have you ever worked with individuals with mental or physical disabilities before? _____

Do you have special interest, hobbies, skills? _____

What is your previous work history? _____

What time do you prefer to volunteer? Morning Afternoon Evening

What day(s) of the week is preferable? _____

How did you learn of our organization? _____

Please give three personal references.

Name: _____
 Address: _____
 Phone: _____ Relationship: _____
 How long have you known this person? _____

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**REQUEST FOR LOCAL LAW ENFORCEMENT CHECK FOR
APPLICANT/EMPLOYER**

INSTRUCTION Please complete and forward to your local law enforcement agency. Upon receipt from your local law enforcement agency, this form is to be retained in the employee's personnel file.

Pursuant to Chapter 85-54, Laws of Florida, Ridge Area Arc requests a local records check on the applicant listed below:

LAST NAME	FIRST NAME	MIDDLE	
DATE OF BIRTH	RACE	SEX	SOCIAL SECURITY NUMBER

Please document the findings on this check and return the findings to:

Ridge Area Arc
4352 Independence St.
Avon Park, FL 33825
Phone: 863-452-1295
FAX: 863-452-5244

Signature of Facility Operator

I hereby authorize Highlands County Sheriff's Department to check any and all records pertaining to criminal convictions, and for any law enforcement agency to release to Ridge Area Arc information regarding convictions under Florida Statutes or statutes of other jurisdiction.

APPLICANT SIGNATURE

DATE

LAW ENFORCEMENT FINDINGS: