



Community Service Application

Welcome! Thank you for your interest in volunteering with EVE. The sensitive nature of our work necessitates that we ask questions of a personal nature. We also need this information in order to make appropriate job assignments so that you will enjoy your work with us and we can accommodate any special needs or concerns that you may have. All information on this application is confidential. Please Print Clearly.

Name: _____	Date: _____	
Address: _____		
City, State, Zip: _____		
Phone: <u>home</u> _____	<u>work</u> _____	<u>cell</u> _____
E-mail: _____		
Best Time to Contact Me: _____	Are you 18 or older? _____	

What is your availability?

How many hours do you need to complete? By what date?

What is the charge that you are fulfilling community service hours for?

What is the name of your probation officer?

Are you currently receiving services from EVE? Yes No

Have you received services from EVE in the past? Yes No

Do you take any medication that could affect your work? Yes No

Do you have any special needs that require accommodations? Yes No

If yes, please explain the accommodation needed:

Have you had any previous volunteer experiences? Yes No

If yes, where did you volunteer? Describe responsibilities:

EVE is sensitive to the fact that some individuals are victimized by the legal system. Answering yes to the following questions will not automatically disqualify you as a potential volunteer.

Have you ever been convicted of a felony, or do you have charges pending? Yes No

If so, please describe:

Have you ever been involved with or been investigated by Child Protective Services? Yes No

If so, please describe:



EVE (End Violent Encounters) Authorization to Check Criminal Record

I, _____ (print name) hereby authorize EVE to obtain information pertaining to any charges and/or convictions I may have had for federal and state criminal violations. This information will include but not be limited to allegations and convictions for any crimes committed upon minors and will be gathered from any law enforcement agency of this state or any state or federal government, to the extent permitted by state and federal law. Unless otherwise indicated below, If I have lived or resided outside of the State of Michigan during the past ten (10) years, I agree that I have never been convicted of a felony or identified as a perpetrator. I agree to provide EVE with information regarding any felony conviction I have received outside the State of Michigan.

Signed: _____ Date: _____

Please provide information about any felony convictions you have received over the past 10 years.

Date of Felony Conviction: _____ State of Felony Conviction: _____

Type of Felony Conviction: _____

Details: _____

To obtain an accurate record, it is important that we properly identify you within our system. To do so, we must gather some more information about you. The information you provide below will not be used to determine whether you are accepted for employment, volunteer or internship opportunities.

Previous Last Name(s) if applicable: _____

Date of Birth: _____ Age: _____ Sex: _____