



VOLUNTEER APPLICATION

Name: _____ Grade: _____

Day(s) you are available to volunteer: _____

Address: _____

Phone Number(s): _____

Email Address: _____

Emergency Contact (list names, addresses and telephone numbers):

1. _____

2. _____

Please detail prior experience working with children:

Please describe any special talents or interests:

Please provide the names, addresses and telephone numbers for three (3) references who can attest to your character and experience working with children. Do not include relatives:

1. _____

2. _____

3. _____

If I am over the age of 18, I understand that prior to working with Wyoming Youth Services Bureau in either I paid or volunteer capacity, I must complete Bureau of Criminal Investigations (BCI), Federal Bureau of Investigations (FBI), and Hamilton County Sheriff's background. I understand that WYSB will reimburse me for the costs of these background checks.

Signature

Date