



**SACRAMENTO
CHILDREN'S HOME**

Giving children & families a better tomorrow since 1867

VOLUNTEER APPLICATION

Name: _____ Date: _____

Home Address: _____

City: _____ Zip: _____

Cell Phone: _____ Email: _____

Employer: _____

Occupation: _____ Length of Employment? _____

Education (course of study & last grade completed): _____

Previous volunteer experience or related work experiences if applicable. Please indicate name of agency and date of service: _____

Skills, hobbies, you might utilize with children: _____

How did you learn about Sacramento Children's Home? _____

Do you have a particular preference as to the age or sex of the child/children you would be working with? _____

Please check all areas of interest:

- Crisis Nurseries Child Care Volunteer
 - North Nursery 4533 Pasadena Ave South Nursery 6699 South Land Park Drive
- Residential Program Volunteer
- Administrative Volunteer
- Special Events Volunteer
- Booths and Fairs Volunteer
- Auxiliaries



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Completing a criminal background check/finger printing and providing proof of a recent negative TB test are required in order to become a volunteer. The Sacramento Children's Home will help coordinate the background check/finger printing. However, prospective volunteers will need to provide their own recent negative TB test. Volunteers are also encouraged to make an optional donation of \$89 to the Sacramento Children's Home to cover the cost of the background check. Proof of Covid-19 vaccination with booster is also required.

Have you ever been arrested or convicted of a crime other than a minor Traffic Violation? _____

If so explain: _____

REFERENCES

I agree to allow the Sacramento Children's Home to seek personal references from the persons submitted below. *Signed:* _____

1. Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email address: _____ Relationship: _____

2. Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email address: _____ Relationship: _____

3. Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Email address: _____ Relationship: _____

Date: _____ Volunteer's Signature: _____

Send application via email to: wendy.beseda@kidshome.org

Questions? Call Wendy Beseda at: (916) 290-8199