



Ruby A. Neeson Diabetes Awareness Foundation, Inc. (RANDAF)

Volunteer Application

Applications can be submitted a variety of ways:

-Mail to: *P.O Box 814, Duluth, Georgia 30096*

-Fax application to: 888-623-3021

-Email at: info@fightdiabetesnow.org

Ruby A. Neeson Diabetes Awareness Foundation, Inc. (RANDAF) relies on the help of dedicated and dependable volunteers. RANDAF volunteer opportunities range from community outreach, fundraising, and/or serving on an event committee. If you have any questions please call RANDAF office at (770) 299-1479. Applicants in the Georgia area are encouraged to apply.

Date Application Submitted:

Personal Information

Name:

Address:

City:

State:

Zip:

Home Phone:

Work Phone:

Cell Phone:

Email:

Why are you interested in volunteering? Personal interest Educational Internship

Community Service Hours Court ordered Other _____

Age ____ over 18 ____ under 18

Have you ever worked or do you currently work for RANDAF?

Have you ever received services from RANDAF?

Do you have a valid driver's license?

Do you have a car available for use while volunteering?

Experience and Education

What is your educational/training background?

Community Relations Manager
Phone: 770-299-1479
Fax: 888-623-3021
P.O Box 814, Duluth GA 30096
Email: info@fightdiabetesnow.org

What is your employment history?

Have you had any previous experience as a volunteer? If so, with what organizations, and what kind of work did you do?

Does your current employer have (check all that apply): Program for volunteering
 Donation matching program Grant preference to organizations where you volunteer

Your Interests in RANDAF

How did you learn about RANDAF? Ad Website College/University RANDAF Employee
 Current Volunteer Other *Please specify* _____

Which opportunities do you wish to further explore: Community Outreach Fundraising
 Event Planning Committee

How long can you commit to volunteering? One time Occasionally 3-6 months
 6 months or more Other _____

What days are you available? Mondays Tuesdays Wednesdays Thursdays Fridays
 Saturdays Sundays

What times are you available? Mornings Afternoons Evenings

Do you prefer to work (check all that apply) Directly with people served Behind the scenes
Computers No preference

Hobbies/interests:

Skills you would like to use while volunteering:

Other languages you speak _____ Basic Conversational Fluent
_____ Basic Conversational Fluent

Do you have any special needs or restrictions we should be aware of?

Date you can begin service:

Criminal History

Some volunteer positions *may* require a Criminal History check. Conviction will not necessarily disqualify you from participating in RANDAF Volunteer Program. Have you ever been convicted of a felony? Yes No

If yes, please explain.

Please describe in 3-5 sentences why you want to be a volunteer with RANDAF:

Why have you chosen to volunteer with us? What do you hope to gain from being a volunteer?

Ruby A. Neeson Diabetes Awareness Foundation, Inc. (RANDAF) *considers applicants for volunteering without regard to sex, race, age, religion, national origin, veteran or marital status, or any other legally protected status. We provide reasonable accommodations to qualified individuals with disabilities when it would not be an undue hardship. If you need a reasonable accommodation in the pre-placement process, please contact the director of the volunteering program.*

AUTHORIZATION AND AGREEMENT BY APPLICANT

1. I certify that the facts set for in this volunteer application are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in my application or placement interview may result in the rejection of my application or discharge from the volunteer program.
2. I consent to having Ruby A. Neeson Diabetes Awareness Foundation, Inc. complete a criminal background check prior to volunteering.

Signature of Applicant

Date

Parent/Guardian Signature (required if less than 18 years of age) Date



Volunteer Reference Check

_____ is applying for a Volunteer position with Ruby A. Neeson Diabetes Awareness Foundation, Inc. (RANDAF) and has listed you as a reference. Please assist us returning this completed form to the Community Relations Manager.

Reference:

Name: _____ Title: _____
Affiliation: _____

Please describe your relationship with the applicant and the number of years/months you have been acquainted:

What are some of the applicant's greatest strengths?

What are some of the applicant's greatest challenges?

If applicable, would you recommend this person to volunteer with Ruby A. Neeson Diabetes Awareness Foundation Inc., a state of Georgia registered nonprofit advocacy outreach organization, aiding those affected by diabetes? Yes _____ No _____

Please explain: _____

Please provide a phone number where we can best reach you: _____

Signature _____ Date _____

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