

## Volunteer Application Form

Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer (if employed): \_\_\_\_\_

Work Address: \_\_\_\_\_

\_\_\_\_\_  
City State Zip Code

Work Phone: \_\_\_\_\_ Work hours: \_\_\_\_\_

May we call you at work? \_\_\_\_\_ Yes \_\_\_\_\_ No

Brief description of the work you do: \_\_\_\_\_

\_\_\_\_\_

List current community activities: \_\_\_\_\_

\_\_\_\_\_

List current and previous volunteer work (include a brief description of duties/activities and dates of service): \_\_\_\_\_

\_\_\_\_\_

What are your reasons for wanting to become a CCMS volunteer? \_\_\_\_\_

\_\_\_\_\_

Your areas of volunteer interest (check all that apply): \_\_\_\_\_ office/clerical  
\_\_\_\_\_ special events \_\_\_\_\_ concerts/receptions \_\_\_\_\_ data entry

How did you learn of CCMS? \_\_\_\_\_

If you have any physical restrictions, please give a brief description so we are able to accommodate for you (i.e. sitting, standing, stairs, lifting, driving, etc.): \_\_\_\_\_  
\_\_\_\_\_

Have you ever been arrested for or convicted of a crime other than a traffic violation? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain the charge? \_\_\_\_\_

Date convicted: \_\_\_\_\_ Where: \_\_\_\_\_

Please list three references of people who know you well, other than relatives, preferably for whom you have worked in either a paid or volunteer capacity. If you are currently working, either paid or as a volunteer, please include the name of your supervisor.

| NAME | COMPLETE ADDRESS | Phone | Relationship |
|------|------------------|-------|--------------|
| 1.   | _____            | _____ | _____        |
| 2.   | _____            | _____ | _____        |
| 3.   | _____            | _____ | _____        |

The Concord Community Music School reserves the right to make any checks deemed appropriate as to the suitability of anyone responsible for their volunteer work at the school. All information will be held in the strictest confidence.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Date

*Please mail this application to: Volunteer Coordinator  
Concord Community Music School  
23 Wall Street  
Concord, NH 03301*

Not required to give information prohibited by state law. Application does not necessarily guarantee placement.