



*Dr. Jean W. Rothenberg
Institute for Better Communication*

Volunteer Application Form

Thank you for your interest in the Hearing Speech and Deaf Center of Greater Cincinnati

Please Type or Print

Name (Last) (First) (Middle)

AKA (Maiden Names, etc.) Date of Birth

Address (Street) (City) (Zip)

Home Phone Work Phone Cell Phone E-Mail

Emergency Contact Name/Relationship Phone/Contact Number

Occupation/ Employer Are you retired?

Employer Address (Street) (City) (Zip)

How Long? Description of Work

Hours Worked Days Off

Education or Special Training

Service Groups, Professional Memberships

Please list employment for the last ten years, and attach a resume if available.

How did you hear about us? _____



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Driver's License Number

Issuing State

Expiration Date

Have you ever been convicted on any criminal charges?

Yes

No

If yes, give details in the space provided below. List all cases without exception (use the back if needed.)

Date of Offense

Age Then

Charge

City/State

Disposition

List three local references. These individuals may, or may not be contacted.

Name

Address (with Zip)

Phone

Relationship

Have you had any previous exposure to people who are hard of hearing or deaf? If so, please explain.

Do you know American Sign Language?

Yes

No

Please list any computer or office support skills you may have.

Would you be interested in helping out in the office?

Yes

No

Please list the times you would be available to volunteer.

I declare under penalty of perjury that the information I have provided in this application is, to the best of my knowledge, true and correct.

I understand that by submitting this application, I am authorizing inquiries to be made concerning my suitability as a volunteer. This will include either a DOJ or FBI check for any past criminal record. I concur that the District Attorney may conduct this investigation. The information requested in this application and such as may otherwise be obtained will be used only for the purpose of determining suitability as a volunteer. All information will be held in confidence.

No individual will be rejected because of race, color, religious creed, national origin, sex, age, marital status, or disability.

Applicant's Signature

Date