



*Please complete both sides of the  
TVH Volunteer Application and mail it to:*

Tri-Valley Haven  
**Attn: Coordinator of Volunteers**  
P.O. Box 2190  
Livermore, CA 94551

## TEEN VOLUNTEER APPLICATION

Please note that teens will **NOT** work directly with clients!

(PLEASE PRINT CLEARLY)

Name \_\_\_\_\_

Street Address \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact Name & Number \_\_\_\_\_

I am 21 years of age or older:    YES    NO    If no, I am 13 years or older: YES    NO

VOLUNTEER AREA(S) OF INTEREST:

- |   |   |
|---|---|
| <input type="checkbox"/> Childcare Team * | <input type="checkbox"/> Office Work        |
| <input type="checkbox"/> Food Pantry      | <input type="checkbox"/> Thrift Store       |
| <input type="checkbox"/> Special Events   | <input type="checkbox"/> Service Project ** |

**\* Teen & Supervising Adult must attend 2 hr training, adult must have background check, and supervising adult must ALWAYS accompany and stay with teen while doing childcare in shelter.**

**\*\* Separate Application required. Please request application from Volunteer Coordinator.**

DO YOU FLUENTLY SPEAK ANY LANGUAGES OTHER THAN ENGLISH?  
IF YES, WHICH ONES?

\_\_\_\_\_

\_\_\_\_\_

WORK & VOLUNTEER EXPERIENCE:  
(past five years)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

EDUCATION:

(include level and relevant courses studied)

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HAVE YOU EVER RECEIVED, ARE RECEIVING, OR PLAN TO RECEIVE COUNSELING OR OTHER SERVICES FROM TRI-VALLEY HAVEN?

*(Due to a conflict of interest, our policy states that TVH clients may not volunteer while they are receiving TVH services. Any TVH client must wait two years before volunteering.)*

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HOW DID YOU BECOME INTERESTED IN VOLUNTEERING FOR TVH?

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WHAT STRENGTHS CAN YOU BRING AS A VOLUNTEER?

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WHAT ARE YOUR WEAKNESSES? (things you would like to work on?)

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HOBBIES & INTERESTS:

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NAMES AND PHONE NUMBERS OF 3 REFERENCES: (1 business, if employed)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

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WHEN ARE YOU AVAILABLE TO VOLUNTEER? TIME PREFERENCES?

SHIFTS	MON	TUES	WED	THUR	FRI	SAT	SUN
MORNING	_____	_____	_____	_____	_____	_____	_____
AFTERNOON	_____	_____	_____	_____	_____	_____	_____
EVENING	_____	_____	_____	_____	_____	_____	_____