



Camaraderie • Support • Friendship

Compeer of Lebanon County

4 South 4th St., Unit C

Lebanon PA 17042

717-272-8317

www.compeer-lebanon.org

director@compeer-lebanon.org

Name: _____

Address: _____

Phone: _____

Best time to call: _____

Fax: _____ E-mail: _____

Date of Birth: _____ Race: _____ Religion: _____

Birthplace: _____

Maiden Name: _____

Social Security Number: _____
(This is necessary to obtain Criminal Background History Record Check)

Marital status: _____ Age & gender of children: _____

Education/ Training: _____

Occupation: _____

- Military Status:
- Fulltime serving member
 - CFT Serving Reserve Member
 - P/T Reserve Member
 - Honorable Discharged
 - Other

- Military Service (Check all that apply):
- World War II (41-45)
 - Korean War (50-53)
 - Vietnam War (53-75)
 - Cambodian Civil War (70-75)
 - Somalia Conflict
 - Persian Gulf War (90-91)

Bosnian War (93-95)
 Afghanistan War (2001-Present)
 Iraq War (2003-2011)
 Other _____

Indicate Branch of Service _____

Is it important to you that your Compeer friend is of similar service, experience, specific age, religion, ethnic background? If so, please specify: _____

Do you smoke? _____ Do you mind if your friend smokes?

Do you have use of a car? yes no

Do you have a current driver's license? yes no License # _____

Has your license ever been suspended? yes no

If yes, please explain: _____

Do you have auto insurance? yes no

Name of Insurance Agency: _____

Have you ever been convicted of a crime (except minor traffic violations)? yes no

If yes, give date and nature of charge and conviction: _____

Are there any misdemeanor/felony charges pending against you now? yes no

If yes, please give nature of charge: _____

Foreign languages: _____ *Sign Language: yes no*

Hobbies, clubs, special interests, skills: _____

Do you have any medical or psychological conditions that affect your health? yes no

If yes, please explain: _____

How did you learn about Compeer? _____

What prompted your interest in volunteering for Compeer? _____

Compeer is aware of the sensitive nature of some of the questions asked. It has been our experience that having as much information as possible about each individual, whether volunteer or client, increases our ability to match people successfully. All information is requested to ensure, to the greatest degree possible, the success of the matching process. Compeer does not discriminate on the basis of age, gender, ethnicity, religious affiliation or sexual orientation. I understand that the previous information given by me is confidential, and that, as a volunteer, I will help the client to the best of my ability in accordance with the policies of the agency. I will maintain complete confidentiality concerning all information on Compeer clients. I further understand that this interview by a Compeer staff person does not obligate me to accept a volunteer opportunity.

I CERTIFY THAT THE ABOVE INFORMATION IS ACCURATE AND GIVE THE COMPEER OF LEBANON COUNTY PROGRAM MY PERMISSION TO VERIFY THIS INFORMATION WITH THE APPROPRIATE AGENCY AND AGREE TO A CRIMINAL BACKGROUND CHECK.

Volunteer Signature: _____ Date: _____

(If possible, please attach a copy of your driver's license & auto insurance card)

VOLUNTEER EMPLOYMENT HISTORY AND PERSONAL REFERENCE

Volunteer Name: _____

Please provide us with your employment history, including names of supervisors. Depending on your length of employment, one or more supervisors will be contacted for a character reference. We also require a personal reference who can comment on your ability to serve as a volunteer. The reference cannot be a relative and must have known you for at least one year. (If you are a full-time student, please provide 2 references from your college experience)

Employment History - Please list your last three employers beginning with your current employer. (If retired, list last employer.)

Date of Employment: from _____ to _____

Employer: _____

Address: _____

Supervisor: _____ Phone: () _____

Date of Employment: from _____ to _____

Employer: _____

Address: _____

Supervisor: _____ Phone: () _____

Employed from _____ to _____

Employer: _____

Address: _____

Supervisor: _____ Phone: () _____

Personal Reference:

Name: _____

Address: _____

Phone: _____

Email: _____

Please provide an email address, if possible, so that we can electronically send our reference form. Thank you.

PHOTO RELEASE

If at any time a photo of me is taken by a photographer for public relations or promotional materials during my volunteer duties, I agree to let my picture be used without remuneration for such publicity.

Signature: _____

Date: _____