



PERSONNEL DATA INFORMATION SHEET

[HR APPLICATION FOR VOLUNTEERS]

Last Name: _____ First Name: _____ MI: _____

Nicknames: _____ Birth Month/Day: ____/____

Other Aliases/Names:
(include Maiden Name, Previous Married Names, Name Changes, etc...): _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Phone Numbers (Include Area Code): _____ (Cell) _____ (Home)

Email Address: _____

Do you have access to the Internet on a regular basis: ___ Yes ___ No *[You may be Provided a SpeakingOut Email Address]*

Driver's License #: _____ State Issued: _____ Exp. Date: _____

For Identification purposes, please provide a photo or scanned copy of your current Driver's License, or any other valid form of identification (Government or State Issue; i.e. Military ID or State ID)

List ALL Previous Residences (City & State Only): _____, _____
_____, _____
_____, _____
_____, _____

Have you ever been Arrested or Convicted of a Crime? (Check One) _____ Yes (if yes, please explain) _____ No

One of the Officers of the organization will, at a minimum, research the appropriate Statewide & Nationwide Sex Offender Registries. Although not generally the case, you will be notified in advance of any additional background checks that may be required; as determined on a case-by-case basis. Do we have your Consent? Please initial... _____ Yes _____ No

PERSONNEL DATA INFORMATION SHEET - Continued

How did you initially hear about SpeakingOut? _____

List the Volunteer Position you are Applying for: _____

Please list the reason(s) you feel you will be an asset to SpeakingOut in this specific Volunteer role?

Please explain why you chose SpeakingOut (specifically) to Volunteer for? _____

Current Occupation: _____

Skills / Past Experience you feel may be relevant to this Volunteer Role: _____

Please list 2 Non-Family Member References whom we may contact (include Name, Contact # & Email Address):

Upon acceptance of this Volunteer position on SpeakingOut's Team, you will required to...

1. *Sign Job Description (Organization & Duties/Responsibilities/Expectations)*
2. *Fill Out & Sign Conflict of Interest Disclosure form*
3. *Fill Out & Sign Monthly Financial Commitment to SpeakingOut form (Requirement for Officers & Directors / Optional, but recommended for all other Volunteers)*
4. *Provide a Quote (required) & Picture (optional) for SpeakingOut's website to also be featured in SpeakingOut News (monthly eNewsletter), as well as in each of our Social Networking Sites.*
5. *Provide any additional information and/or fill out any additional documents/forms requested by the Officer/President or Board.*

Are you willing to complete all of the necessary & required documents/forms? Please initial... _____ Yes _____ No

***Any questions/concerns, please call 865-230-8600 or send email to susansd@speakingout-csa.com.
Please Scan/Email completed form to susansd@speakingout-csa.com
or mail to SpeakingOut, P.O. Box 5826, Oak Ridge, TN 37831***