



3297 Highway 51 South
P O Box 97
Senatobia, MS 38668
Direct:662.366.6930
jhurt@baddour.org
1.888.4.BADDOUR ext 1.230
www.baddour.org

VOLUNTEER APPLICATION

Date_____

Date of Birth_____

Mrs. Ms. Miss Mr. Dr. (circle one)

Social Security Number_____

Name

Last First Middle
Address

Street Apartment #

City State Zip Code

Home Phone (____)_____ Work Phone (____)_____ Cell Phone (____)_____

Email Address_____

Emergency Contact

Name Relationship Phone
Occupation

Current Employer

Student? ___Yes___No High School/College/University_____

Personal References (Please list two non-family references)

Name_____ Name_____

Address_____ Address_____

Phone Number_____ Phone Number_____

Volunteer Experience:

Please list places you have volunteered in the past. If no volunteer experience, list relevant work experience:

Civic Affiliations:

Special Training: (i.e., office skills, clinical training, technical skills) _____

Hobbies: _____

Reasons for volunteering: _____

Please check the volunteer activities you are interested in:

<input type="checkbox"/> fundraising events	<input type="checkbox"/> tutoring	<input type="checkbox"/> arts & crafts
<input type="checkbox"/> gardening/yard work	<input type="checkbox"/> recreation events	<input type="checkbox"/> general maintenance
<input type="checkbox"/> clerical/computer work	<input type="checkbox"/> adopt-a-resident program	<input type="checkbox"/> horticulture program
<input type="checkbox"/> seasonal Garden Ctr. work	<input type="checkbox"/> other	

Please list the days and times you are available to volunteer:

Volunteer Days

Time Available

Statement of Confidentiality:

If accepted as a volunteer at **The Baddour Center**, I pledge to hold in strict confidence, all personal and official matters which come to my attention. I also understand that no photographs, video or audio tapes may be made of residents and/or day clients. It is my responsibility to respect and preserve the privacy of the residents as well as details involved.

Signature

How were you referred to **The Baddour Center**? friend newspaper other _____

Please return this application to: Jenny Hurt, Community Engagement, The Baddour Center, 3297 Highway 51 South, P. O. Box 97, Senatobia, MS 38668, , or email to jhurt@baddour.org , (662)366-6930 or fax to (662)-562-0114.

Mission Statement

The Baddour Center is dedicated to providing a model residential community for adults with mild and moderate intellectual disabilities in an environment that promotes maximum growth intellectually, spiritually, physically, socially, emotionally and vocationally.