

Bristol Lifestyle Recovery VOLUNTEER APPLICATION

Full Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Phone: _____ Email: _____

Why are you interested in volunteering at BLR?

What area(s) of service are you interested in? (describe &/or check all that apply in Section I below)

Are you actively involved in a faith community at this time? If so please describe your involvement and provide at least one reference of a leader in that community that knows you personally.

*Part of service/volunteering at BLR requires a Background Check for those 18 and older. You will be asked to submit basic information to a third party vendor who conducts our Background Checks and at this time we ask you to consider a donation of \$10.00 to help us cover the costs. You can discuss this with our Involvement/Volunteer staff when you are ready to take our basic training & orientation seminar.

SECTION I – Areas of Interest (check all that apply)

- Housekeeping Food Service Building/Maintenance Lawncare/Landscaping
 Transportation (insurance/certification required) Health & Fitness
 Teaching (also complete Section III below)
 Mentoring (list any area of specialization)
 Other (please describe):

SECTION II - Recovery

Are you in Recovery? (yes / no)

If "yes" what programs are you working?

List current Recovery group(s) you attend (Name, location, contact person)

Provide at least two personal Recovery references and their contact info

SECTION III - Teaching

TOPIC(s) you would like to teach

SETTING (group size preference; one-on-one, etc.):

CURRICULUM (would you use your own material, use published curriculum – or – are you willing to use curriculum we provide):

COST (if any, for materials needed for the course – per person or for "site license", etc.?)

REFERENCES (where you have taught or led classes before, personal references of people who know about your ability to teach or lead a group/class)

PRINTED NAME: _____

SIGNATURE: _____ DATE: _____