



**PROJECT RESILIENCE
VOLUNTEER APPLICATION**

www.BambooBridges.org

Part I

Legal Name: _____ Preferred Name: _____

Driver's License # & state of issue: _____ Birthdate: _____

Sex: M/F

Street Address _____

_____ City State Zip

Mailing Address (if different than street address) _____

_____ City State Zip

Preferred Phone (H) _____ (Cell) _____

Email: _____

How did you hear about Project Resilience? _____

Why are you interested in volunteering with Project Resilience?

Language ability – include all languages starting with English
(Please rate/circle your ability on 5-point scale with 1=poor and 5=excellent/native):

Language	Writing	Reading	Speaking
English	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5
	1 2 3 4 5	1 2 3 4 5	1 2 3 4 5



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Part II

Education Completed (please circle highest): HS GED Some college BS/BA Graduate

Volunteer experience:

Organization	Supervisor	Address	Phone	Email	Dates

Employment History (begin with most recent – you may attach addendum):

Organization	Supervisor	Address	Phone	Email	Dates

Education or training for work with domestic violence or sexual assault (List formal education courses and on the job training participated in):

Training	Organization	Date(s)



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Part III

Availability for volunteering (check all that apply):

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Morning							
Afternoon							
Evenings							

Transportation:

Do you have reliable transportation?	Type of vehicle	Driver's license#	State	Insurance Carrier
___ Yes ___ No				

List any medical conditions we should be aware of _____

Emergency contact(s):

Name	Relationship to you	Phone

Describe any experience you have with physically, emotionally, or psychologically abusive relationships. _____



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Describe any criminal history that you may have had (please list all charges/arrests/convictions past, current, or pending to include accusations of child abuse or child molestation):

Offense	Conviction?	Date(s)	Status

Have you ever been involved in a family court actions:

Matter	Date(s)	Status

Please list three references (not relatives) and **submit three reference letters** to BambooBridges@gmail.com:

	Name	Address	City/Zip
1			
2			
3			

	Relationship	Phone	Email
1			
2			
3			



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By submitting this application, I affirm the facts set forth in it are true and complete. I understand if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my dismissal.

Name (printed) _____

Signature: _____ Date: _____

Thank you for completing the volunteer application. If accepted, this application is required for any payments to be issued to you as an independent contractor under our Project Resilience grant. You will be required to complete training through one of our partner organizations, which may require a background check.

Please email or mail your completed application and three reference letter to:

BBProjectResilience@gmail.com

BAMBOO BRIDGES
PO BOX 530664
HENDERSON NV 89053

If you have questions, email us. You can also call **(725) 222-0041**.