

INSPIRED SPACES FOUNDATION

VOLUNTEER APPLICATION

Thank you for your interest in volunteering with Inspired Spaces Foundation. Please complete the information below and submit your application for review. We look forward to volunteering together in service of our amazing clients.

Name: _____

Address: _____

Primary Phone Number: _____ Email: _____

Skills and Interests: _____

Why do you want to volunteer with the Inspired Spaces Foundation? _____

Anything else you want us to know? _____

Can you provide proof of Covid-19 vaccinations? ^{MD} Yes ^{MD} No

Have you been convicted of a crime in the last 10 years? ^{MD} Yes ^{MD} No

If yes, this does not disqualify you from volunteering, but may limit the type of volunteer position available. Please briefly explain. _____

Because we work with a vulnerable population, Inspired Spaces Foundation requires background screenings on all our volunteers. Please provide the following information:

Full Legal Name

Date of Birth

Social Security Number

I hereby authorize Inspired Spaces Foundation to conduct a background screening as part of the application process for volunteering.

Signature

Date