



Volunteer Application Form

Thank you for your interest in becoming a Full Circle Restorative Justice Volunteer! Please complete this form to provide useful information about yourself, and to ensure the best match between you and the organization.

Your name: _____

Your preferred phone number: _____

Your address: _____

Your email address (please write it carefully):

Employer Name (if applicable) _____

Your position _____

Primary service(s) and area/population served _____

Preferred method(s) of contact: Phone Email

Briefly describe why you would like to support Full Circle Restorative Justice and what you bring to the organization:



Your current organizational affiliations, board or committees you have served on (names of the organization and your role(s):

Organization	Role/Title	Dates of Service
1. _____		
2. _____		
3. _____		
4. _____		

Which of your skills would you like to utilize with FCRJ? Check those that apply:

- | | | |
|------------------------|----------------------|---------------------|
| Fundraising | Communications | Training, education |
| Program evaluation | Nonprofit experience | Social media |
| Youth service projects | Special events | Human resources |
| Mentoring | Outreach, advocacy | Grant writing |
| Leadership | Transportation | Other: _____ |

Please share education, personal life experience, training or skill(s) that you would like to utilize?



Please list any groups, organizations or businesses that you could serve as a liaison to on behalf of FCRJ.

If you are approved to become a volunteer, you agree to a background check, confidentiality, and a willingness to commit to FCRJ values. You agree to attend monthly volunteer/training meetings on the fourth Thursday of each month from 4:00PM to 5:30PM, we request no more than three missed meetings in one year. You do not have any conflict-of-interest in participating with FCRJ. You understand that to ensure quality of service, FCRJ maintains all authority over who volunteers, and that at any time I may be dismissed as a volunteer. FCRJ may also ask for a twelve (12) month commitment of participation.

Applicant signature: _____ Date: _____

If you are under 18, please provide your parent or guardian's name, address, email, and phone #:
