

www.fuelcybercafe.com

Volunteering is available equally to everyone. Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Application Data

How were you referred to us: \_\_\_\_\_

Full Name: \_\_\_\_\_ Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_

last first middle

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Mobile/Pager/Other: \_\_\_\_\_ E-mail \_\_\_\_\_

Date Available to start: \_\_\_\_\_ Social Security: \_\_\_\_\_

Have you ever volunteered at Fuel Cyber Cafe or worked with one of it affiliates: \_\_\_\_\_

If yes, when: \_\_\_\_\_

Are you a citizen of the United States? Yes No

If not do you have legal papers? Yes No

Type of Volunteer Desired: Full Time Part-Time Temporary Season

Have you ever pled "guilty" or "no contest" to been convicted of a crime? Yes No

If yes give details: \_\_\_\_\_

*Answering yes to these questions does not constitute an automatic rejection to participation at Fuel Cyber Cafe. Date of offense, seriousness and nature of the violation, rehabilitation and position applied for will be considered.*

Driver license number if applicable: \_\_\_\_\_ State: \_\_\_\_\_

### Education

Middle School: \_\_\_\_\_ Address: \_\_\_\_\_

# of years completed: \_\_\_\_\_ Did you graduate: Yes No

Favorite class: \_\_\_\_\_ GPA: \_\_\_\_\_ Class Rank: \_\_\_\_\_

High School: \_\_\_\_\_ Address: \_\_\_\_\_

# of years completed: \_\_\_\_\_ Did you graduate: Yes No

Favorite class: \_\_\_\_\_ GPA: \_\_\_\_\_ Class Rank: \_\_\_\_\_

College/University: \_\_\_\_\_ Address: \_\_\_\_\_

# of years completed: \_\_\_\_\_ Did you graduate: Yes No

Major: \_\_\_\_\_ GPA: \_\_\_\_\_ Class Rank: \_\_\_\_\_

Are you interested in the scholarship program Yes No

### References

Please furnish the names, addresses and telephone numbers of two people to whom you are not related and by whom you have not been employed:

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

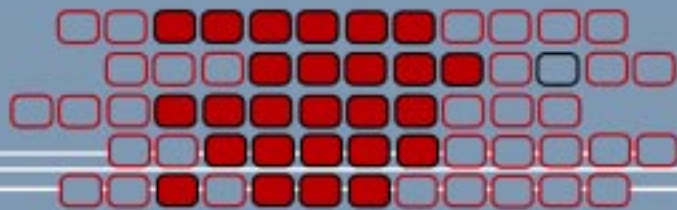
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

SUMMARIZE YOUR SPECIAL SKILLS OR QUALIFICATONS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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Previous Employment (begin with most recent position):

Dates Of Employment: From: \_\_\_ / \_\_\_ / \_\_\_ To: \_\_\_ / \_\_\_ / \_\_\_ Positions Held \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone:(\_\_\_\_) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_

May we contact this employer for reference? Yes No

Dates Of Employment: From: \_\_\_ / \_\_\_ / \_\_\_ To: \_\_\_ / \_\_\_ / \_\_\_ Positions Held \_\_\_\_\_

Firm: \_\_\_\_\_ Address: \_\_\_\_\_

Phone:(\_\_\_\_) \_\_\_\_\_ Supervisor: \_\_\_\_\_ Title: \_\_\_\_\_

Responsibilities: \_\_\_\_\_

Reason For Leaving: \_\_\_\_\_

May we contact this employer for reference? Yes No

Availability

Tues \_\_\_\_\_

Wed \_\_\_\_\_

Thurs \_\_\_\_\_

Fri \_\_\_\_\_

Sat \_\_\_\_\_

I certify that my answers are true and complete to the best of my knowledge. I authorize Fuel Cyber Cafe to make such investigations and inquires of my personal, employment, education, financial, or medical history and other related matters as may be necessary for an volunteer decision. I hereby release Fuel Cyber Cafe from all liability In responding to inquiries in connection with my application.

I understand that false or misleading information given in my application or interview(s) may result in discharge

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_