



Volunteer Applicant Statement

Personal Information (Please Print)

First Name

Mi

Last Name

Date of Birth

Social Security Number

I certify that the facts contained in the online-application are true and complete to the best of my knowledge. I understand that if employed (volunteers are considered non-compensated employees of FAFS) falsified statements on the online-application shall be grounds for dismissal.

Volunteer Signature

Date

I further understand that if I receive an opportunity to volunteer, it will be conditioned upon: (1) FAFS' investigation of the work and personal references I have provided; (2) all criminal history and background checks applicable to the position for which I am applying. I understand and agree that if I do not comply with any of the foregoing, or FAFS is not satisfied with the results of same, any volunteer opportunities will be rescinded.

Volunteer Signature

Date