



VOLUNTEER APPLICATION

SBS AIDS FOUNDATION RESEARCH CORPORATION

Please print in black or blue ink, or use a typewriter.

Return the signed application to SBS in person or via airmail.

GENERAL INFORMATION

1 **Full Legal Name:** _____

2 **Full Address:** _____

3 **Home Phone #:** _____ 4. **Mobile Phone #:** _____

5 **Email Address:** _____ 6. **Social Security #:** _____

ORGANIZATIONAL AFFILIATION(S)

7 **Organization Sponsor:** _____

8 **Place of Worship:** _____

EMPLOYMENT AND/OR VOLUNTEER HISTORY

9. Provide the following information for your past three (3) employers and/or volunteer activities, starting with the most recent.

From:	To:	Employer:	Telephone:
Job Title:		Address:	
Immediate Supervisor & Title:		Nature of Work Performed and Job Responsibilities:	
Reason for Leaving:		Salary/Hourly Rate	Beginning: Final:

From:	To:	Employer:	Telephone:
Job Title:		Address:	
Immediate Supervisor & Title:		Nature of Work Performed and Job Responsibilities:	
Reason for Leaving:		Salary/Hourly Rate	Beginning: Final:

P.O Box 1173PARK FOREST ILLINOIS 60466

Email us at: sbsaidsresearch@yahoo.com Tel: +1 708 747 5680 Fax: +1 708 747 5682



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Job Title:	Address:		
Immediate Supervisor & Title:			
	Nature of Work Performed and Job Responsibilities:		
Reason for Leaving:	Salary/Hourly Rate	Beginning:	Final:

SKILLS AND QUALIFICATIONS

- 10** Summarize any training, skills, licenses, and/or certificates that may qualify you as being able to perform job-related functions in the position for which you are applying:
-
-

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EDUCATIONAL BACKGROUND

11	Name and Location of Institution	Dates Attended	Major/Minor	Degree Received
. <td data-bbox="126 304 662 361">I.</td> <td data-bbox="662 304 948 361"></td> <td data-bbox="948 304 1235 361"></td> <td data-bbox="1235 304 1526 361"></td>	I.			

12 Other areas of interest or study: _____

13 If you expect to complete an educational program in the near future, what is the type of degree, and what is the expected completion date?: _____

INTEREST IN VOLUNTEERING

14. What are your reasons for volunteering at LPAC?: _____

FUTURE PLANS

15. What are your future life plans?: _____

OTHER INFORMATION

16 Have you ever been convicted of a crime in the last seven (7) years? Yes No

If yes, please explain: _____

(Convictions will not necessarily be a bar to employment. Each instance and explanation will be considered based on the position for which you are applying.)

CERTIFICATION

I hereby certify that all entries on both sides are true and complete, and I agree and understand that any falsification of information herein, regardless of time of discovery, may cause forfeiture on my part of my employment at the SBS AIDS FOUNDATION RESEARCH CORPORATION. I understand that all information on this application is subject to verification and I consent to criminal history background checks. I also consent that you may contact references, former employers and educational institutions listed regarding this application. I further authorize the SBS AIDS FOUNDATION RESEARCH CORPORATION to rely upon and use, as it sees fit, any information received from such contacts.



Signature of Applicant: _____

Date: _____