



# Nurture the Creative **Mind** Foundation

Volunteer/Member/Intern Application Packet



<b>OFFICE USE ONLY:</b> Received by: _____ Date: ___/___/___ Application: <input type="checkbox"/> Complete <input type="checkbox"/> Incomplete Date Interviewed: ___/___/___ Approved: <input type="checkbox"/> Yes <input type="checkbox"/> No ___/___/___
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2955 n 400 w #1026, Layton, UT 84041

# NCM FOUNDATION VOLUNTEER/MEMBER/INTERN APPLICATION

## APPLICANT INFORMATION

PLEASE PRINT CLEARLY

First Name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last Name: \_\_\_\_\_

Please list any other names by which you have been known, including maiden name: \_\_\_\_\_

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

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

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

Phone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_ (Cell) \_\_\_\_\_

Email: \_\_\_\_\_ D.O.B: \_\_\_/\_\_\_/\_\_\_

\*\*\*Ethnicity:  American Indian  Asian  African American  Hispanic  Caucasian  Pacific Islander  
 Other \_\_\_\_\_  Rather not Answer

Please Note: This information is for statistical purposes only. Answering this question is completely voluntary. It will in no way be used to determine your qualifications for volunteering at the Nurture the Creative Mind Foundation.

Emergency Contact: \_\_\_\_\_  
(Name) (Relationship) (Phone)

How were you referred to the Nurture the Creative Mind Foundation? \_\_\_\_\_

Previous volunteer experience: \_\_\_\_\_  
\_\_\_\_\_

Reason for volunteering: \_\_\_\_\_  
\_\_\_\_\_

Emergency Contact: \_\_\_\_\_  
(Name) (Relationship) (Phone)

Do you have a Facebook Acct?  Yes  No If yes, would you join the Nurture the Creative Mind Page?  Yes  No

Have you ever been convicted of, pled guilty to, and/or pled no contest to a crime (felony or misdemeanor, including but not limited to theft, banking, fraud, drug and/or alcohol-related offenses, assault, sex related or child abuse related offenses, etc...)?  Yes  No If yes, please explain (State, date, type of crime, place of occurrence, disposition):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\*Note: Conviction of a crime is not necessarily grounds for disqualification.*

Are you currently a student?  Yes  No Name of School: \_\_\_\_\_ Year \_\_\_\_\_

Are you volunteering as part of a Service Learning Course or Program?  Yes  No If yes, hrs needed? \_\_\_\_\_  
Class: \_\_\_\_\_ Professor/Instructor: \_\_\_\_\_

Are you volunteering as a part of a corporate/community program or organization?  Yes  No If yes, hrs needed? \_\_\_\_\_

