

**Helping Area Response Teams (HART) Huron Valley
APPLICATION FOR VOLUNTEER POSITION**

INSTRUCTIONS: Please print the requested information in the spaces provided below.

Name: _____

Address: _____

Date of Application: _____ Date Available to Start: _____

Looking to assist as a: Vehicle Driver _____ On-Scene Volunteer _____
Supply Runner/Delivery Person _____ Other _____

What days of the week and times are you available to volunteer?

How did you hear about HART Huron Valley?

Do you have any special training skills, qualifications, licenses, certifications or other experiences that relate to the position(s) applied for?
First Responder? _____ Family of First Responder? _____
Military Experience? _____ Medical Training? _____
Driving Large Vehicles? _____ Talking on Radio Transceiver? _____
Other? _____

Although a valid Michigan driver's license is required for all HART Huron Valley positions, exceptions are made for certain non-driving jobs if the applicant, who is otherwise qualified for a position for which he/she applies, is unable to obtain a license because of a physical or mental disability. **A license check will be conducted.**

Type of license: Operator's License _____
Chauffeur's License _____
Commercial Driver's License (CDL) _____

License number: _____ Expiration Date: _____

Contact Information: Email: _____

Cell Phone: _____ Carrier: _____

Other Phone Numbers; _____

Shirt Size (for volunteer apparel):
Small _____ Medium _____ Large _____ Extra Large _____

In case of emergency, notify:

Name	Address	Telephone Number
------	---------	------------------

Medical Examinations. In accordance with applicable legal requirements, HART Huron Valley may require job applicants to undergo a medical examination.

I HEREBY CERTIFY THAT I AM NOT CURRENTLY ENGAGED IN THE ILLEGAL USE OF DRUGS. I understand that as a condition of my volunteer position I may be required to take a drug test for the illegal use of drugs which may include the collection of urine samples from my person. I agree that the results of this test may be submitted to HART Huron Valley or its authorized representative, and I expressly release the collection agency and the testing laboratory from any and all liability for performing the requested test, and for communicating the results to HART Huron Valley. I understand that if the results of any drug test are positive, it will be cause for rejection of my application and my relationship with HART Huron Valley may be immediately terminated.

Applicant's Signature _____ Date _____

- I certify that the answers and information given by me in this application are true, correct and complete without qualification. I understand that HART Huron Valley has the right to refuse to accept or immediately discharge me, at any time.
- I hereby authorize HART Huron Valley to verify the answers and information given by me in this application and to make any investigation on my background deemed necessary.
- I authorize HART Huron Valley to use any information in its possession concerning me for any purpose it deems appropriate, including disclosure of information to any third party without notification to me of such disclosure, and I release HART Huron Valley from any liability in connection with such use or disclosure.
- I understand and agree that I will be bound by the rules, regulations, policies, procedures, and other terms and conditions of HART Huron Valley, as they are from time-to-time changed, with or without notice.
- I agree not to commence any action or claim relating to my volunteer position with HART Huron Valley.

Applicant's Signature _____ Date _____

Please return completed and signed applications to:

HART Huron Valley
Peace Lutheran Church
8260 Jackson Road
Ann Arbor, MI 48130