



1425 Mountain Drive N, Bethlehem, PA 18015 • [info@bloomforwomen.org](mailto:info@bloomforwomen.org) • [610.866.5755](tel:610.866.5755) • [BloomForWomen.org](http://BloomForWomen.org)

**Volunteer Application**

Date: _____
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First Name \_\_\_\_\_ Last Name \_\_\_\_\_

I am 18 or older.

No       Yes

Birthday: *Optional - day and month only* \_\_\_\_/\_\_\_\_

Email \_\_\_\_\_

Would like to receive email newsletters?

No       Yes

Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Faith Community: \_\_\_\_\_

Bilingual?

No       Yes / What other language(s) do you speak? \_\_\_\_\_

How did you hear about Bloom? \_\_\_\_\_

Do you have previous volunteer experience? *If so, briefly explain.*

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Please describe any talent, skills, or professional training that would benefit Bloom.  
If you are a college student, what is your major?

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How did you first learn about human trafficking and exploitation?

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How would you describe your knowledge about human trafficking and exploitation?

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Have you previously volunteered or worked with an organization that aids survivors of human trafficking, sexual exploitation, abuse, homelessness, or addiction? *If so, please briefly describe your experience.*

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Are you currently involved in any professional, civic, or ministry organizations? *If so, which and how?*

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What motivated you to reach out and get involved with Bloom?

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Emergency Contact Name / Relationship \_\_\_\_\_

Emergency Contact Phone, Email, Address - *the best way(s) to reach them*

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**Please indicate your area(s) of interest:**

Find descriptions on our web page, [www.bloomforwomen.org](http://www.bloomforwomen.org) – ‘Get Involved, Volunteer’.

*\*Requires background checks, references, additional paperwork, and an interview so we can get to know you.*

- My Sister’s Closet
- Bloom Creative Studio
- Driver / Resident Support\*
- Mother’s Helper\*
- Events
- Other / How would you like to help? Please explain.

What is your availability (weekly, monthly, quarterly, etc.) now and for the foreseeable future?

Is there anything more you would like to tell us about yourself?

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**If you’re applying to be a General Volunteer, you’re finished!**

*Thank You!  
We’ll be in touch.*

**If you are 18+ and APPLYING TO VOLUNTEER DIRECTLY WITH VICTIMS AND/OR SURVIVORS, all information on pgs. 3 & 4 must also be completed to be approved.**

**CRIMINAL HISTORY**

**These questions are supplemental to the required background check.**

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I am not the subject of a criminal investigation.

- True       False

I do not have criminal charges pending against me.

- True       False

I have never been convicted of any criminal offense (felony or Class A or B misdemeanor) involving a juvenile/child or the direct endangerment of a juvenile/child.

- True       False

I have not been convicted of any felony offense (or an equivalent offense under the Uniform Code of Military Justice) within the past 15 years.

- True       False

I have never been convicted of a sex offense.

- True       False

I am not legally required to register as a sex offender.

- True       False

I have never been convicted of a capital offense.

- True       False

**If you answered "False" to any of the above, please explain below.**

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I agree to notify Bloom in writing within 24 hours if ANY of the above criminal history changes.

No       Yes

**Please provide two references who are NOT related to you.**

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**REFERENCE 1:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Relationship to you \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

**REFERENCE 2:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Relationship to you \_\_\_\_\_

Email \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

*Thank You!  
We'll be in touch.*

**AGREEMENT AND SIGNATURE/E-SIGNATURE**

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I AGREE TO THE FOLLOWING:

By placing my name below and submitting this application, I affirm that the facts herein are true and complete. I understand that if I am accepted as a Bloom volunteer any false statements, omissions, or other misrepresentations made on this application or references may result in my immediate dismissal. I understand that Bloom is not obligated to provide a reason for their decision in accepting or rejecting me as a volunteer.

\_\_\_\_\_  
First and Last Name – **Printed & SIGNED**

\_\_\_\_\_  
Today's Date