



Please return completed applications to:
 Blue Sky Inn
 Attn: Lisa Thompson
 3056 W. Sunnyside Avenue, #3
 Chicago, Illinois 60625

Questions (773) 710-7346 or info@blueskyinn.org

Date _____

Name _____ Email _____

Day Phone _____ Evening Phone _____

Mailing Address _____

Occupation _____

Current Employer/ School _____

Social Security Number _____ Date of Birth _____

Do you have any physical/emotional limitations that may interfere with volunteering? Y N

If yes, please explain _____

Have you ever been convicted of a felony? Y N

If yes, please explain _____

Educational Degree _____ Field of Study _____

Are you bilingual? Y N If so, what language(s)? _____

How did you hear about Blue Sky Inn? _____

Using the table below, please mark an 'X' for the times that you are unavailable to volunteer, and a 'Y' for the times that you are available:

| | M | T | W | Th | F | Sa | Su |
|-----------|---|---|---|----|---|----|----|
| Morning | | | | | | | |
| Afternoon | | | | | | | |
| Evening | | | | | | | |

Thank you for taking this important step toward changing someone's life!

Which of the following ways would you like to volunteer? (You may choose more than one.)

- Weekly program
- Fundraising (Planning special events, soliciting donations of art supplies, theater tickets, etc.)
- Marketing/ web design/ graphic design
- Volunteer recruitment/ coordination
- Office administration

Please describe previous experiences with children/teens: _____

Why do you want to volunteer with Blue Sky Inn? _____

What special interests or talents would you like to share (including but not exclusive to the arts)?

I hereby certify, under penalty of perjury, that the answers given above are true and correct to the best of my knowledge and belief.

Signature

Date

NOTE: All volunteers will have their name and Social Security Number and/or Date of Birth submitted for screening by the Illinois State Police. This is a mandatory process. Each facility may also have additional screening criteria that would be applicable to Blue Sky Inn volunteers

For internal use:

Date of orientation

Start date

End date

Thank you for taking this important step toward changing someone's life!