

# Budget Management Program for Seniors

HALE BARNARD SERVICES

273 Clarendon Street • Boston, Massachusetts 02116

Telephone: (617) 536-3726 x 17 • Fax: (617) 536-7480

e-mail: [palcidor@halebarnard.org](mailto:palcidor@halebarnard.org)

**Office use only:** Date received \_\_\_\_\_ Interviewed \_\_\_\_\_ References checked \_\_\_\_\_  
Trained \_\_\_\_\_ CORI \_\_\_\_\_ Matched \_\_\_\_\_

## Volunteer Application

**Personal:** (This information is requested to help us better match people with similar background experiences and interests, and is available only to our staff)

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Birthday: \_\_\_\_\_ Social Security # \_\_\_\_\_

Telephone: Home \_\_\_\_\_ Cell \_\_\_\_\_ e-mail \_\_\_\_\_

In case of emergency contact: \_\_\_\_\_ tel. \_\_\_\_\_ Relation \_\_\_\_\_

Do you speak a foreign language: \_\_\_\_\_ Are you able to sign using ASL? \_\_\_\_\_

Geographic preference: \_\_\_\_\_

What sort of transportation do you use: Drive own car \_\_\_ Insurance carrier \_\_\_\_\_

Policy# \_\_\_\_\_ Rely on others \_\_\_\_\_ Public transportation \_\_\_\_\_

Profession/type of work experience: \_\_\_\_\_

Currently : *Employed Full-time* \_\_\_\_\_ *Part-time* \_\_\_\_\_ *Retired* \_\_\_\_\_

Current Employer address/telephone  
\_\_\_\_\_

Volunteers are asked to make a renewable 1-year commitment to this job. Barring unexpected emergencies, are you willing and able to commit to the full on-year term of this program? \_\_\_\_\_

How did you learn about the Budget Management Program for Seniors?  
\_\_\_\_\_

What are your reasons for wanting to volunteer in this program?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Describe your volunteer experiences; include any service or charitable organizations whose activities may relate to this job

Organization/Date

Responsibilities

Organization/Date	Responsibilities
_____	_____
_____	_____
_____	_____
_____	_____

What is the highest level of education you have obtained: High School \_\_\_\_\_ College/other post-high school education \_\_\_\_\_ Advanced degree \_\_\_\_\_

Do you mind: Pets? \_\_\_\_\_ Smoking? \_\_\_\_\_ Unclean house? \_\_\_\_\_  
Do you have any educational or life experiences that would be helpful for this job?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List some of your skills, hobbies, and interests:

\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a felony or denied bond? No \_\_\_\_\_ Yes \_\_\_\_\_

Are you willing to undergo a Criminal Offender Record Investigation (CORI) and a police background check?

\_\_\_\_\_

References: List three people we can contact for references. Two should be **professional** relationships (employer, teacher, etc.), a reference letter will be sent from this office, so full addresses are necessary.

1. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Relation to you \_\_\_\_\_ Length of time known \_\_\_\_\_

2. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Relation to you \_\_\_\_\_ Length of time known \_\_\_\_\_

3. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Relation to you \_\_\_\_\_ Length of time known \_\_\_\_\_

***I understand that the references listed above will be contacted, and that the sponsoring agency will do a records check on qualified applicants. I consent to the release of all relevant information concerning my ability and fitness to work as a Money Management Volunteer. I certify that the information given herein is accurate to the best of my knowledge. I understand this information will be held in confidence and not released to another person or agency.***

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return to:** Patricia Alcidor, 273 Clarendon Street, Boston, MA 02116