



Communities in Schools of Chatham County
Volunteer Information & Reference Form

Name: _____ Home Phone: (____) _____

Cell Phone: _____ E-Mail Address: _____

Address: _____ City _____ Zip _____

How long have you lived in this county? _____ In North Carolina? _____

How did you hear about Communities in Schools of Chatham County? _____

List four references (not relatives) who have known you for at least one year. One must be your employer. Include complete mailing addresses.

1. Name: _____
Address: _____
City State Zip
Home Phone: (____) _____ Work Phone: (____) _____

2. Name: _____
Address: _____
City State Zip
Home Phone: (____) _____ Work Phone: (____) _____

3. Name: _____
Address: _____
City State Zip
Home Phone: (____) _____ Work Phone: (____) _____

4. Name: _____
Address: _____
City State Zip
Home Phone: (____) _____ Work Phone: (____) _____

If you have done volunteer work with a youth prior to this time, list as a reference your supervisor(s) from that experience, even if it occurred in another state.

1. Name: _____
Address: _____
City State Zip
Home Phone:() _____ Work Phone:() _____

I give my permission to the Director of this program to contact the references listed above. I understand and agree that a negative reference may result in me not becoming Communities in Schools of Chatham County lunch buddy.

Signature: _____

Date: _____

Please mail your completed, signed application to Communities In Schools of Chatham County
PO Box 903
Siler City, NC 27344
Questions? Please contact us at: 919-663-0116