

# Huntington City Mission

Community Service Application  
624 10<sup>th</sup> Street  
Huntington, WV 25701  
(304) 523-0293

Date: \_\_\_\_\_ SS#: \_\_\_\_\_

Name: \_\_\_\_\_  
(First) (MI) (Last)

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Phone (day): \_\_\_\_\_ Phone (eve): \_\_\_\_\_ Email address: \_\_\_\_\_

Sex: \_\_\_\_\_ D.O.B.: \_\_\_\_\_

Place of Employment/School: \_\_\_\_\_

Reason for Community Service (Be specific): \_\_\_\_\_

\_\_\_\_\_

Agency Requiring Community Service: \_\_\_\_\_ Contact Person: \_\_\_\_\_

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

Have you ever been convicted of a violent crime or felony of any sort? YES or NO *if yes please provide detailed information*

\_\_\_\_\_

\_\_\_\_\_

No. of Hours Required: \_\_\_\_\_ To Be Completed By: \_\_\_\_\_

Day/Times Available for Community Service: \_\_\_\_\_

By signing this application I agree to the conditions set forth by the Huntington City Mission regarding confidentiality, drug free workplace and dress code. I agree to perform my community service in a professional manner. I agree that HCM may contact the above agency prior to or during service to the mission and if I do not follow through with the assigned community service schedule that the appropriate representative will be notified. I agree that by not showing up at the appointed time, being continually late, or violating any policy of Huntington City Mission, or not appropriately notifying Huntington City Mission of my absence I risk completion of community service hours.

I hereby release the Huntington City Mission, its Board of Directors, employees and other persons associated with the Huntington City Mission, from any and all liability that might arise by virtue of all personal injury, property damage, or other damage that might result from the use of said facility.

\_\_\_\_\_  
Applicant's Signature Date

\_\_\_\_\_  
Volunteer Supervisor's Signature Date

\_\_\_\_\_  
Parental Signature (If under 18) Date

