



2019 VOLUNTEER APPLICATION

Instructions: Submit completed and signed application **with current resume** to info@abdc.org or Fax to: (907) 562-6988. Keep answers within the space allotted; use the space on page two for any additional information. If you have any questions contact ABDC at (907)562-0335.

VOLUNTEER INFORMATION

Enter full name exactly as it appears on your state ID or passport used for travel; full name, date of birth and gender are required for purchasing airline tickets for program travel.

First Name [] Middle [] Last []

Street/PO Box [] City [] State [] Zip []

CELL Phone Number [] Best Email Address []

Alternate Phone Number [] Date of Birth mm/dd/yyyy [] Gender []

Employer [] University (if applicable) []

Able to lift at least 50#? [] Universal Shirt Size [] Preference [] *style and availability dependent on funding*

Convicted/plead guilty to crime other than minor traffic violation? If yes, provide explanation. []

List other volunteer experiences: []

PROGRAM QUESTIONS

How did you hear about the program? []

What makes you a good candidate? []

What position are you interested in (tax preparer/team leader)? []

When are you available to travel (weekend/weeklong/both)? []

How many trips would you be willing to travel on? []

Are you comfortable being subjected to extreme temperatures/weather conditions in rural Alaska? []

Are you comfortable sharing a sleeping/living area with members of the opposite sex? []

Are you comfortable sleeping on the floor (typically office, library, school, etc.)? []

Have you ever flown in a four to six seat airplane? [] Would you be willing to? []

Would you be willing to ride on a snowmachine/all terrain vehicle in extreme weather conditions? []

Do you typically travel with an animal/pet? [] If yes, what animal? []

Are you able to recognize the acceptability of math calculations made by yourself/computer? []

List five items you never travel without: []

ADDITIONAL INFORMATION

List any special needs or limitations

List any additional information:

EMERGENCY CONTACT

First Name

Last Name

Relationship to You

Primary Phone Number

Alternate Phone Number

ACKNOWLEDGEMENTS

Initial Each Item

I understand that training is a critical part of volunteering for this program and agree to submit assignments and certifications timely.

I understand that as a tax preparer access to a computer running a **WINDOWS** platform will be required and that I must download tax software to complete the training. **TaxSlayer desktop will not run on an Apple platform.**

I understand that upon acceptance into the program that I will be required to submit a \$200 deposit to ABDC, refundable when program commitment is fulfilled, to include timely submission of training requirements and travel.

AUTHORIZATION

By signing below, you agree to abide by the policies and procedures set forth by the Alaska Business Development Center. You understand that you will be volunteering at your own risk to the extent provided in the separate document **LIABILITY WAIVER: ACKNOWLEDGEMENT OF RISKS, ASSUMPTION OF RISKS AND RESPONSIBILITY, AND RELEASE OF LIABILITY** (hereafter Liability Waiver) executed by the undersigned; and that the organization, its employees and its volunteers, cannot assume any responsibility or liability for any accident, injury or health problem which may arise from any volunteer work you perform to the extent provided in the Liability Waiver, and you agree that all information you provided in this application is true and complete to the best of your knowledge.

Volunteer Printed Name

Date mm/dd/yyyy

Volunteer Signature

Thank you for your interest in ABDC's Volunteer Tax & Loan Program.

*Applications will not be considered complete without a **current resume**.*

If you are new to the program and pass the initial screening phase, ABDC will contact you for an interview.
