

# VOLUNTEER APPLICATION

Connecticut Radio Information System  
315 Windsor Avenue  
Windsor, CT 06095-4536



Phone: 860-527-8000  
Fax: 860-727-9581  
E-mail: info@crisradio.org

To be filled out by CRIS

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

Mr.  Mrs.  Ms. Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

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

Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home E-mail: \_\_\_\_\_ Work E-mail: \_\_\_\_\_

## VOLUNTEER PREFERENCES

Please check your preference(s)

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Reader-Live                             | <input type="checkbox"/> Reader-recorded-English    | <input type="checkbox"/> Board Operator, audio editing |
| <input type="checkbox"/> PR assistant                            | <input type="checkbox"/> Reader-recorded-Spanish    | <input type="checkbox"/> Clerical/Office/Telephone     |
| <input type="checkbox"/> Mailing Projects                        | <input type="checkbox"/> Reader-recorded-TeleReader | <input type="checkbox"/> Board of Directors            |
| <input type="checkbox"/> Special Events (Dining & Dancing, Golf) |   | <input type="checkbox"/> Speaker's Bureau              |

Indicate studio preference:  Windsor  Danbury  Norwich  Trumbull  W. Haven  Norwalk

If you are available for the Speaker's Bureau, list towns or areas where you are willing to travel:

How did you learn about CRIS? \_\_\_\_\_

Current employer (school if student): \_\_\_\_\_

Retired from: \_\_\_\_\_

Volunteer experience: \_\_\_\_\_

## IN CASE OF EMERGENCY

Person to notify \_\_\_\_\_ Relationship \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

*application continues on other side*

**VOLUNTEER AVAILABILITY**

My schedule is flexible

I am available as follows:

Day(s) of Week \_\_\_\_\_ Hours: \_\_\_\_\_  am  pm

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Some grant funding sources require CRIS to report information about volunteer age, race and disability status. This information is not used for any other purposes. Your cooperation is requested, but not required for volunteer service.

Ethnicity:  Caucasian  African-American  Native American  Hispanic  Asian

Do you have disability?  No  Yes Please define \_\_\_\_\_

Date of Birth \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

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**TALENT RELEASE**

I grant authority to Connecticut Radio Information System, Inc., and those acting within its authority, to distribute via radio, television, telephone, and the internet my name and all live or recorded readings and/or performances submitted by me. Authority is also granted to record and copy my submitted readings and/or performances to audiotape, cd, or any other medium, for distribution to individuals or groups as Connecticut Radio Information System, and those acting within its authority, deem appropriate.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Parent or Guardian [if volunteer is under 18]

\_\_\_\_\_  
Date

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**STATEMENT OF CONFIDENTIALITY**

I promise to respect the privacy and confidentiality of all listeners of CRIS.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date

Return Application to: Connecticut Radio Information System, 315 Windsor Avenue, Windsor, CT 06095.

**For CRIS Office**

Interviewer Comments:

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

Interview Date: \_\_\_\_\_ Assignment: \_\_\_\_\_

Interviewer's Signature: \_\_\_\_\_ Date: \_\_\_\_\_