



**OFFICE OF THE STATE'S ATTORNEY, LAKE COUNTY, ILLINOIS**

*Volunteer Application*

Please submit the completed application to [nfarrow@lakecountyil.gov](mailto:nfarrow@lakecountyil.gov) or the Lake County State's Attorney's Office  
Attention Nicole Farrow at 18 North County, Waukegan, Illinois 60085

Personal Information					
Name	Last	First	Middle	Date of Birth	Social Security Number
Address	Street	City	State	Zip Code	List any other languages you speak
Home Phone	Work Phone	Cell Phone	Email Address		
Name of Emergency Contact				Phone Number	

Employment Record (Include Volunteer Experience)			
Date(s) of Employment	Agency/Company	Phone	Supervisor Name

References			
Name	Address	Phone	Relationship to Reference

Reason for Applying
Please indicate why you are considering volunteering at this time? What is your area of interest?
What do you hope to gain through our program?
Summarize special skills and qualifications you have acquired from employment, previous volunteer work or through other activities, including hobbies.

Availability
During which hours are you available to volunteer?
Mornings (9:00 am to 12:00 pm)      Monday      Tuesday      Wednesday      Thursday      Friday
Afternoons (2:00 pm to 5:00 pm)
What is your estimated time commitment per month?

The information stated above is true and correct

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

FOR OFFICE USE ONLY		
APPLICATION RECEIVED BY	Date	TIME