



Community Service Application

<b>Office Use Only</b>		
----- Background Check	----- Received Volunteer Manual	----- Sign In Book
----- Orientation/Tour	----- Parental/Guardian Consent	----- Picture for DB
----- Letter Completed	----- Confidentiality/Liability	
----- Date Hours Started	----- Community Service database	
	----- Date Hours Completed	

Number of Community Service hours needed: \_\_\_\_\_ Date to be completed by: \_\_\_\_\_

First Name:	MI:	Last Name:
Address/City/Zip Code:		
Phone Number(s):		
Email Address:	Date of Birth:	

Recent Employment History	Dates	Description of Work
Volunteer History	Dates	Description of Work

Availability: Please be specific in the hours you are available

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____
_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____	_____ to _____

Please continue to the other side of the application →

Please explain why you were sentenced to do these community service hours (the specific criminal charges).

Probation Officer's name & phone #: \_\_\_\_\_

Please list any physical limitations you may have:

EMERGENCY INFORMATION In case of an emergency, please notify:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Contact Numbers: (H) \_\_\_\_\_ (W) \_\_\_\_\_ Cell: \_\_\_\_\_

I certify that the answers given on this application are true and complete to the best of my knowledge.  
I authorize Stepping Stones of Dunn County to conduct a criminal record check.

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

Please email your completed application to [communityconnect@steppingstonesdc.org](mailto:communityconnect@steppingstonesdc.org) or drop it off at:

Stepping Stones of Dunn County  
1602 Stout Road  
Menomonie, WI 54751  
Ph. (715) 235-2920