



Responsibilities and what you enjoyed most/least about this experience.

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Agency:

Dates Worked:

Phone:

Supervisor(s):

Responsibilities and what you enjoyed most/least about this experience.

Ability 1st Utah has a vital interest in maintaining a safe, healthy, and productive work environment for its volunteers, employees, and consumers. As a result, all individuals who are accepted in the Volunteer Program will be required to successfully complete a finger print and back ground check, and sign a "Criminal History Self Disclosure Affidavit".

Ability 1st Utah reserves the right to terminate an applicant for the Volunteer Program or a volunteer at anytime.

I hereby state the above information is correct to the best of my knowledge and authorize investigation and verification of all statements contained in this application. I understand that misrepresentation or omission of facts may render me ineligible for consideration.

**Signature:**

**Date:**

Please return completed form to:

Wanda Lassen, Volunteer Coordinator  
Ability 1st Utah  
491 N. Freedom Blvd  
Provo, UT 84601

Email: [wanda@abilityfirstutah.org](mailto:wanda@abilityfirstutah.org)  
Fax: (801) 373-5094

For questions or further comment contact Wanda Lassen at (801) 373-5044 or [wanda@abilityfirstutah.org](mailto:wanda@abilityfirstutah.org)