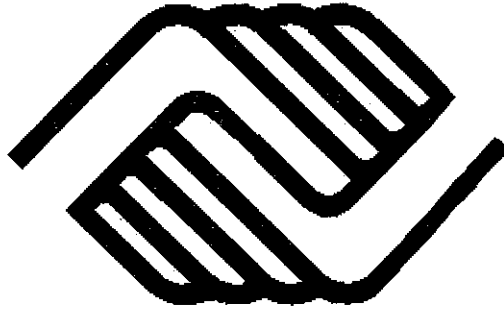


VOLUNTEER APPLICATION



BOYS & GIRLS CLUBS OF THE EAST VALLEY

Last Name _____
 First Name _____
 Date _____
 Branch _____
 Assigned Position _____

Fingerprints: On File Not Needed Under 18

<p style="text-align: center;">For Club Use Only</p> <p>Interview by: _____ Date: ___/___/___</p> <p>Supervisor: _____ Date: ___/___/___</p> <p>Orientation Done by: _____ Date: ___/___/___</p>	<p style="text-align: center;">Reference Checks For Club Use</p> <p>Reference 1 Ck. <input type="checkbox"/> By _____</p> <p>Reference 2 Ck. <input type="checkbox"/> By _____</p>
<p style="text-align: center;">Proposed</p> <p>Starting Date: _____ Weekly Commitment of Time: _____</p> <p>___/___/___ From _____ To _____</p>	<p style="text-align: center;">For Admin</p> <p>Date Approved: ___/___/___</p> <p>Date Denied: ___/___/___</p> <p>Club Notified via _____ on ___/___/___</p>

Actual Start Date _____

**OMISSION OF ANY OF THE ABOVE INFORMATION WILL CAUSE APPLICATION
 TO BE RETURNED TO THE CLUB FOR COMPLETION, EXTENDING PROCESSING TIME WE
 RESERVE THE RIGHT TO REFUSE VOLUNTEER SERVICE TO ANYONE WITH OR WITHOUT CAUSE.**

Education (highest level completed): _____

If you are currently a student, what school do you attend? _____

Do you have your own transportation? _____

Have you worked or volunteered here before? No Yes, when? _____

Why do you want to volunteer with our organization? _____

Coaches – please answer the next four questions.

How were you referred to our organization? _____

If volunteering to coach, have you coached for us before? (list Branch) _____

List your sports experience: _____

Which age group(s) do you prefer to coach? _____

Check those areas for assignment where you have experience or interest.
USE "S" FOR SKILL AND "I" FOR INTEREST

Fundraising or Administration:

- | | | |
|---|---|---|
| <input type="checkbox"/> Concession Sales | <input type="checkbox"/> Annual Auction | <input type="checkbox"/> BonVivant Food & Wine Fest |
| <input type="checkbox"/> Campaign For Kids | <input type="checkbox"/> Planned Giving | <input type="checkbox"/> Other Special Events |
| <input type="checkbox"/> Word Processing | <input type="checkbox"/> Filing | <input type="checkbox"/> Answering Phones |
| <input type="checkbox"/> Graphic Art | <input type="checkbox"/> Mailings | <input type="checkbox"/> Bookkeeping |
| <input type="checkbox"/> Desktop Publishing | <input type="checkbox"/> Phone Calling | <input type="checkbox"/> Computer Programming |
| <input type="checkbox"/> Data Input | <input type="checkbox"/> Typing | <input type="checkbox"/> Other _____ |

Professional or Program:

- | | | |
|--|---|--|
| <input type="checkbox"/> Speaking | <input type="checkbox"/> Grant Writing | <input type="checkbox"/> Computer Training |
| <input type="checkbox"/> Teaching | <input type="checkbox"/> Teen Programming | <input type="checkbox"/> Prevention Programs |
| <input type="checkbox"/> Fine Arts | <input type="checkbox"/> Visual Arts | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Coaching Sports | <input type="checkbox"/> Sports Programs | <input type="checkbox"/> Counseling |

**BOYS & GIRLS CLUBS OF THE EAST VALLEY
2602 W Baseline Road Suite 25, Mesa, AZ 85202**

**VOLUNTEER
APPLICATION**

- Games room Activities Learning Center

- Leadership Training

Other _____

Maintenance:

- Carpentry Electrical Painting
 Lawn Maintenance Heat & Air Maintenance Other _____

List any additional achievements, abilities or activities that you consider relevant to your request to volunteer here such as computer language or software programs, foreign language (proficiency in speaking and/or writing), etc.

What type of work would you like to do here?

LOCATION & AVAILABILITY

Check those locations where you would like to volunteer:

- | | | |
|---|---|---|
| <input type="checkbox"/> Ladmo Branch-Tempe | <input type="checkbox"/> Stevenson | <input type="checkbox"/> Mesa Arts Academy |
| <input type="checkbox"/> Compadre Branch-Chandler | <input type="checkbox"/> North Tempe | <input type="checkbox"/> Apache Junction |
| <input type="checkbox"/> Guadalupe Branch | <input type="checkbox"/> Gilbert Branch | <input type="checkbox"/> Gila River--Sacaton |
| <input type="checkbox"/> Fundraising Events | <input type="checkbox"/> Gila River--Komatke Branch | <input type="checkbox"/> Program Service Center |
| <input type="checkbox"/> G. Woods Branch-Mesa | <input type="checkbox"/> Queen Creek | <input type="checkbox"/> Globe |

Check the days you are available and note the best times for you:

BEST TIMES:

- | | |
|---|-------|
| <input type="checkbox"/> Monday | _____ |
| <input type="checkbox"/> Tuesday | _____ |
| <input type="checkbox"/> Wednesday | _____ |
| <input type="checkbox"/> Thursday | _____ |
| <input type="checkbox"/> Friday | _____ |
| <input type="checkbox"/> Saturday (if open) | _____ |
| <input type="checkbox"/> Sunday (if open) | _____ |

Check the months and dates of the month you are available:

- January ___ to ___ February ___ to ___ March ___ to ___ April ___ to ___
 May ___ to ___ June ___ to ___ July ___ to ___ August ___ to ___
 September ___ to ___ October ___ to ___ November ___ to ___ December ___ to ___

REFERENCES:

Please list the names and telephone numbers of two personal, work, or school references not related to you. If coaching, please list two individuals that can attest to your coaching ability.

Name: _____ Telephone: () _____

Name: _____ Telephone: () _____

PLEASE READ CAREFULLY. INITIAL EACH PARAGRAPH AND SIGN BELOW:

_____ I hereby certify that I have not knowingly withheld any information that might adversely affect my chances for volunteering and that the answers given by me are true and correct to the best of my knowledge. I understand that any omission or misstatement of material fact on this application will be grounds for rejection of this application or for immediate dismissal, regardless of the time elapsed before discovery.

_____ In order to safeguard the well being of the youth served by our organization, I authorize the Boys & Girls Clubs of the East Valley to verify all information provided by me on this application. I hereby authorize any reference listed on this application and/or any educational entity or person on this application to disclose to the organization any and all letters, reports and other information related to my work or educational record, without giving me prior notice of such disclosure. In addition, I hereby release the organization, my former employers, all educational entities listed on this application and all other persons or organizations from any and all claims, demands, or liabilities arising out of or in any way related to such investigation or disclosure.

_____ I understand that it is a requirement of the organization that all volunteers who work with or have contact with children must complete a background check.

_____ In consideration of being a volunteer for Boys & Girls Clubs of the East Valley, I do hereby assume the risk of injury and all medical expense incurred from any injury resulting from my volunteer participation. I understand, acknowledge and agree I am not covered by Workers' Compensation insurance or benefits provided thereunder. I hereby release, discharge and hold harmless Boys & Girls Clubs of the East Valley, its agents, Board of Directors, representatives and employees, from any and all claims whatsoever, known or unknown, for damages or injuries to myself. This waiver includes myself, my family members and descendants.

Signature of Applicant

Date

Volunteers will NOT begin working until application and background check have been processed and cleared.

ADULT VOLUNTEER BACKGROUND VERIFICATION AUTHORIZATION

PLEASE COMPLETE THE SECTION BELOW & SIGN

I, _____
Last Name
First Name
Middle Name

_____ City St. Zip Code Dates Lived Here

_____ Years Used Social Security Number

*Date of Birth: ____/____/____
 *Note: The above information is required for identification purposes only and is in no manner used as qualification to become a volunteer.

do hereby authorize Boys & Girls Clubs of the East Valley to make an independent investigation of my background, references, character, past employment, education, criminal or police records, including those maintained by both public and private organizations and all public records in accordance with ADA, labor and wage records, etc. or part thereof, and authorize any duly authorized agent of our background check vendor to obtain, whether the said records are public or private, and including those which may be deemed to be privileged or confidential in nature and I release all persons from liability on account of such disclosures. Information appearing on this Authorization will be used exclusively by our background check vendor for identification purposes and for the release information which will be considered in determining any suitability to become a volunteer. I certify that I have made true, correct, and complete answers and statements on my volunteer application, any supplements to it and in any interview in the knowledge that they will be relied upon in considering my application. I agree to provide additional information that may be requested to process my application. I authorize without reservation, any party or agency contacted by our background check vendor to furnish the above-mentioned information. Volunteers need to submit a new background check every twelve months.

I have the right to make a request to our background check vendor upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including sources of information, and the recipients of any reports on me which our background check vendor has previously furnished within the two year period preceding my request.

I understand and agree that any omission, false statement, misleading statement, or answer made by me on my application or any supplements to it and in any interviews will be sufficient grounds for rejection.

I release Boys & Girls Clubs of the East Valley and any person or entity which provides information pursuant to this authorization, from any and all liabilities, claims or law suits in regard to the information obtained from any and all of the above referenced sources.

I understand that any offer of becoming a volunteer is contingent on a satisfactory background investigation. I certify that the following is my true and complete legal name and all information contained herein is true and correct to the best of my knowledge.

 Printed Name Volunteer Signature (electronic signatures not accepted) Date

