

Youth Volunteer Affidavit

Note: A local attorney must review this form to ensure compliance with local laws.

District _____ is committed to creating and maintaining the safest possible environment for all participants in Rotary activities. It is the duty of all Rotarians, their spouses and partners, and any other volunteers to safeguard to the best of their ability the welfare of children and young people involved in Rotary programs or activities and prevent physical, sexual, or emotional abuse of young participants.

This information may be provided to an outside agency that this district has contracted with to conduct background checks.

PERSONAL INFORMATION

Name: _____

Address: _____

City: _____ State/Province: _____ Postal Code: _____

How long at this address? _____ (If fewer than five years, list previous residence[s] on the back of this sheet.)

Government Identification (e.g., Social Security Number): _____

Date of Birth (dd/mm/yyyy): _____

CONSENT

I certify that all of the statements in this affidavit, and in any attachments hereto, are true and correct to the best of my knowledge and that I have not withheld any information that would affect this affidavit unfavorably. I understand that District _____ youth programs will deny a volunteer position to anyone convicted of a crime of violence.

I give my permission to District _____ to verify information given in this affidavit, including searches of law enforcement and published records (including driving records and criminal background checks) and contact with my former employers and with references provided. I understand that this information will be used, in part, to determine my eligibility for a volunteer position. I also understand that as long as I remain a volunteer, this information may be checked again at any time. I understand that I will have an opportunity to review the criminal history and, if I dispute the record as received, a procedure is available for clarification.

WAIVER

IN CONSIDERATION of my acceptance and participation in the youth programs, I, to the full extent permitted by law, hereby release and agree to save, hold harmless, and indemnify all members, officers, directors, committee members, and employees of the participating Rotary clubs and districts, and of Rotary International ("Indemnitees"), from any or all liability for any loss, property damage, personal injury, or death, including any such liability that may arise out of the negligence of any of the Indemnitees or may be suffered or claimed by me as a result of an investigation of my background in connection with this affidavit.

I further agree to conform to the rules, regulations, and policies of Rotary International, the District _____ youth programs and its affiliates.

I acknowledge that I have read and understand the above affidavit, consent, and waiver and that I sign this form voluntarily.

Signature of Applicant: _____

Please Print Name: _____ Date: _____

ADDITIONAL INFORMATION

Home Phone: _____ E-mail: _____

Business Phone: _____ Fax: _____

Are you a member of a Rotary club? ☐ Yes ☐ No

If yes, indicate club name and year joined: _____

Position applied for: _____

Have you held a Rotary youth programs position in the past? ☐ Yes ☐ No

If yes, what position and when? _____

EMPLOYMENT HISTORY (for the past five years; attach additional sheets, if necessary)

Current Employer: _____

Address: _____

City: _____ State/Province: _____ Postal Code: _____

Phone: _____ Position: _____

Dates of Employment: _____ Supervisor's Name: _____

Previous Employer: _____

Address: _____

City: _____ State/Province: _____ Postal Code: _____

Phone: _____ Position: _____

Dates of Employment: _____ Supervisor's Name: _____

VOLUNTEER HISTORY WITH YOUTH (for the past five years; attach additional sheets, if necessary)

Organization: _____

Address: _____

City: _____ State/Province: _____ Postal Code: _____

Phone: _____ Position: _____

Dates Held: _____ Director's Name: _____

Organization: _____

Address: _____

City: _____ State/Province: _____ Postal Code: _____

Phone: _____ Position: _____

Dates Held: _____ Director's Name: _____

PERSONAL REFERENCES (may not be relatives; no more than one former or current Rotarian)

1. Name: _____
Address: _____
City: _____ State/Province: _____ Postal Code: _____
Phone: _____ Relationship: _____
2. Name: _____
Address: _____
City: _____ State/Province: _____ Postal Code: _____
Phone: _____ Relationship: _____
3. Name: _____
Address: _____
City: _____ State/Province: _____ Postal Code: _____
Phone: _____ Relationship: _____

QUALIFICATIONS AND TRAINING

What relevant qualifications or training do you have for this position? Please describe in full.

CRIMINAL HISTORY

1. Have you ever been charged with, been convicted of, or pled guilty to any crime(s)? ☐ Yes ☐ No
2. Have you ever been subject to any court order (including civil, family, and criminal courts) involving sexual, physical, or verbal abuse, including but not limited to domestic violence or civil harassment injunction or protective order? ☐ Yes ☐ No

If yes, please explain. Also indicate dates(s) of incidents(s) and the country and state in which each occurred (attach a separate sheet, if needed).

For District Use Only:

DATE References checked by _____
INITIALS

DATE Interview completed by _____
INITIALS

DATE Background check completed by _____
INITIALS