DISTRICT 7475 YOUTH PROGRAM VOLUNTEER APPLICATION

DISTRICT 7475 YOUTH COUNSELOR ADVANCED CERTIFICATION

Statement of Conduct for Working with Youth: The district strives to create and maintain a safe environment for all youth who participate in Rotary activities. To the best of their ability, Rotarians, Rotarians' spouses and partners, and other volunteers must safeguard the children and young people they come into contact with and protect them from physical, sexual, and psychological abuse.

The information you provide will be given to an agency that District 7475 (the "district") has hired to conduct background checks.

PERSONAL INFORMATION

Full name:						
Address:						
City:	State:	ZIP code:				
How long have you live	d at this address?					
If less than five years, li	st previous residences:					
Address:						
City:	State:	ZIP code:				
How long did you live a	t this address?					
Primary phone number	Primary phone number: Secondary phone number:					
Email address (persona	l):					
Government identificat	ion number:					
(e.g., social security nur	nber, social insurance number, or	national ID number)				
Date of birth (DD/MM/	/YYYY):					
CRIMINAL HISTORY	1					
1. Have you ever b	een charged with, been convicted	of, or pleaded guilty to any crime?	□Yes □No			
	, or verbal abuse, including but not	cluding an order from a civil, family, or cr t limited to domestic violence or civil har				

If you answered yes to either question, please explain. Also indicate the dates of the incidents and the country and province or state where they occurred (attach a separate sheet, if needed).

ADDITIONAL INFORMATION, QUALIFICATIONS, AND TRAINING

Position you're applying for:								
Are you a member of a Rotary or Rotaract club?								
If yes, indicate club name and ye	ar joined:							
What about the position interest	s you?							
What qualifications, preparation, and training do you have that is relevant to this position?								
HISTORY OF VOLUNTEERING WITH YOUTH THROUGH ROTARY (Attach additional sheets if necessary)								
Have you held a Rotary youth program position in the past?								
If yes, indicate below:								
District:	Role:	Years:						
Contact person's name:								
Phone number:								
Email address:								
Club:	Role:	Years:						
Contact person's name:								
Phone number:								
Email address:								
Events:	Role:	Years:						
Contact person's name:								
Phone number:								
Email address:								

HISTORY OF VOLUNTEERING WITH YOUTH THROUGH OTHER ORGANIZATIONS

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

Organization:	
Address:	
City: State:	ZIP code:
Position:	Dates of service:
Contact person's name, phone number, email addr	ess:
Organization:	
Address:	
City: State:	ZIP code:
Position:	Dates of service:
Contact person's name, phone number, email addr	ess:
EMPLOYMENT HISTORY (for the past five years; attach additional sheets if r	necessary)
Current or most recent employer:	
Address:	
City: State:	ZIP code:
	ZIP code: Dates of employment:
Position:	
Position:	Dates of employment:
Position: Supervisor's name, phone number, email address:	Dates of employment:
Position: Supervisor's name, phone number, email address:	Dates of employment:
Position:	Dates of employment:

PERSONAL REFERENCES

(may not be relatives; no more than one may be a former or current Rotary member)

1. Name:				
Address:				
City:	State:		ZIP code:	
Phone:		Email address:		
Relationship:		Years known:		
2. Name:				
Phone:		Email address:		
Relationship:		Years known:		
3. Name:				
Address:				
		Email address:		
		Years known:		

Read the Consent and Waiver and sign this form on Page 5 below

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CONSENT

I certify that all of the statements in this application and any attachments are true and correct to the best of my knowledge and that I have not withheld any information that would affect this application unfavorably. I understand that Rotary District 7475 will deny a volunteer position to anyone who has been convicted of a crime of violence, sexual abuse, or harassment, or any other crime of a sexual nature and may deny a volunteer position to anyone who has been charged with these crimes.

I give Rotary District 7475 permission to verify the information in this application, including by reviewing the public records that I have provided, which are duly certified, or by searching law enforcement and other published records (including driving records and criminal background checks) in addition to contacting my former employers and the references I 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 will be checked again at any time. I understand that I will have an opportunity to review my background check. I further understand that this is a volunteer position involving youth and the requirements may change at any time. I may resign the position, or my services may be terminated at any time without explanation.

WAIVER

In consideration of my acceptance and participation in Rotary youth programs, I, to the full extent permitted by law, hereby release, defend, hold harmless, and indemnify participating Rotary clubs, Rotary districts, multidistrict organizations, and their members, officers, directors, committee members, agents, and employees, and Rotary International, its directors, officers, committee members, employees, agents, and representatives ("Indemnitees") from any or all liability for any claim, loss, damages, liabilities, expenses, bodily 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, action concerning, or communication of my background in connection with this application.

I further agree to conform to the rules, regulations, and policies of Rotary International, the Rotary District 7475 youth program, and its affiliates.

I hereby confirm, represent, and warrant that I have never been convicted of or charged with a violent crime, child abuse or neglect, child pornography, child abduction, kidnapping, rape, or other sexual offense, nor have I ever been ordered by a court to receive psychiatric or psychological treatment in connection therewith.

If any provision of this agreement is determined to be illegal or unenforceable, the remaining provisions shall remain in full force and effect. By signing this application, I acknowledge that I have read this application and fully understand its contents.

Signature of applicant: _____

Printed name: _____ Date: _____