

Name:	
Date:	____/____/____

# VOLUNTEER APPLICATION



## BOYS & GIRLS CLUB OF TRUCKEE MEADOWS

CLUB POINT OF CONTACT: \_\_\_\_\_

For Club Use ONLY	
<p style="text-align: center;"><b>Fingerprints</b></p> <p><input type="checkbox"/> On File</p> <p><input type="checkbox"/> Not Needed (Under 18)</p> <p><input type="checkbox"/> Not Needed (Other)</p>	<p style="text-align: center;"><b>Placement</b></p> <p>Site / Dept: _____</p> <p>Hours: ____:____ To ____:____</p> <p>Days: M<input type="checkbox"/> T<input type="checkbox"/> W<input type="checkbox"/> R<input type="checkbox"/> F<input type="checkbox"/> S<input type="checkbox"/></p>
<p style="text-align: center;"><b>Reference Checks</b></p> <p>Reference Check 1 <input type="checkbox"/> By: _____</p> <p>Reference Check 2 <input type="checkbox"/> By: _____</p> <p>Reference Check 3 <input type="checkbox"/> By: _____</p>	<p style="text-align: center;"><b>For Admin.</b></p> <p>Approved <input type="checkbox"/> Denied <input type="checkbox"/></p> <p>Date: ____/____/____</p>



**BOYS & GIRLS CLUB**  
OF TRUCKEE MEADOWS

**VOLUNTEER APPLICATION**

GENERAL				
<b>Name:</b>				
	<i>First</i>	<i>Last</i>	<i>MI</i>	
<b>Telephone:</b>				
	<i>Home</i>	<i>Cell</i>	<i>Other</i>	
<b>Present Address:</b>				
	<i>Street</i>	<i>City</i>	<i>State</i>	<i>Zip Code</i>
<b>Emergency Contact Name:</b>		<b>Emergency Contact Phone #:</b>		
<b>Referral Source:</b>	<input type="checkbox"/> Self Referral/Volunteer		<input type="checkbox"/> Company Referral/Community Service	
	<input type="checkbox"/> School Referral/Community Service		<input type="checkbox"/> Court Referral/Community Service	
<b>Email Address:</b>				

Questions	
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?	<input type="checkbox"/> Yes <input type="checkbox"/> No    When?
Why do you want to do volunteer work at this nonprofit?	
Have you done work at another nonprofit? If so, where and what?	

References				
<b>Name:</b>		<b>Phone #:</b>		<b>Relationship:</b>
<b>Name:</b>		<b>Phone #:</b>		<b>Relationship:</b>

**Check those areas for assignment where you have experience or interest.**

Athletics		Youth Services		Teen Services		Other	
Coaching	<input type="checkbox"/>	Computers	<input type="checkbox"/>	Computers	<input type="checkbox"/>	Food Preparation	<input type="checkbox"/>
Score Clocks	<input type="checkbox"/>	Arts & Crafts	<input type="checkbox"/>	Arts & Crafts	<input type="checkbox"/>	Culinary Classes	<input type="checkbox"/>
Referee	<input type="checkbox"/>	Games Room Activities	<input type="checkbox"/>	Games Room Activities	<input type="checkbox"/>	Chaperone Dances	<input type="checkbox"/>
Non-traditional Athletic Games	<input type="checkbox"/>	Tutoring	<input type="checkbox"/>	Tutoring	<input type="checkbox"/>	Bulletin Boards	<input type="checkbox"/>
Palates	<input type="checkbox"/>	Reading Buddy	<input type="checkbox"/>	Drama	<input type="checkbox"/>	Greeters	<input type="checkbox"/>
Yoga	<input type="checkbox"/>	Chess	<input type="checkbox"/>	Choir	<input type="checkbox"/>	Filing	<input type="checkbox"/>
Aerobics	<input type="checkbox"/>	Lego Team	<input type="checkbox"/>	Dance	<input type="checkbox"/>	Field Trips	<input type="checkbox"/>
Golf	<input type="checkbox"/>	Drama	<input type="checkbox"/>	Music	<input type="checkbox"/>	Maintenance	<input type="checkbox"/>
Tennis	<input type="checkbox"/>	Choir	<input type="checkbox"/>	Weight Training	<input type="checkbox"/>	Bilingual	<input type="checkbox"/>
		Pottery	<input type="checkbox"/>	Photography	<input type="checkbox"/>	Driver (must have CDL)	<input type="checkbox"/>
		Dance	<input type="checkbox"/>	Scrap booking	<input type="checkbox"/>	Boys & Girls Night Out	<input type="checkbox"/>
		Science	<input type="checkbox"/>	Auto Mechanics	<input type="checkbox"/>	Kids Day	<input type="checkbox"/>
		Music	<input type="checkbox"/>	Wood Shop	<input type="checkbox"/>	Halloween Party	<input type="checkbox"/>
		Sewing	<input type="checkbox"/>	Skateboarding	<input type="checkbox"/>	Thanksgiving Dinner (night before)	<input type="checkbox"/>
		Scrap booking	<input type="checkbox"/>	Pottery	<input type="checkbox"/>	Member Holiday Party	<input type="checkbox"/>
Other							

Do you have any skills you wish to teach a small group of children?	
What type of work would you like to do here?	
List any additional achievements or abilities you consider relevant to your request to volunteer here.	

**GENERAL INFORMATION:**

Have you ever been convicted of or admitted to committing a felony or any of the following criminal offences in this state or similar offences in another state or jurisdiction?  Yes  No

- Contributing to the delinquency of a minor
- Incest
- Kidnapping
- Sexual Assault
- Robbery
- Sexual conduct with a minor
- A dangerous crime against children, aggravated assault committed against a minor less than 15 years of age resulting in a serious physical injury or committed by the use of a deadly weapon or dangerous instrument.
- Felony offences involving distribution of marijuana or dangerous or narcotic drugs
- Aggravated assault
- Sexual abuse of a minor
- First or Second Degree murder
- Arson
- Burglary
- Child abuse
- Molestation of a child

Includes crimes listed herein involving a minor under 15 years of age.

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

**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 of 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 Club of Truckee Meadows 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 organizations 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 in any way related to such investigation or disclosure.

\_\_\_\_\_ I understand that it is a requirement of the organization that all volunteers 18 years or older and who work with or have contact with children be fingerprinted. I understand that fingerprints will be used to check the criminal history reports of Washoe County, the state of Nevada and the FBI.

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