



**BOYS & GIRLS CLUBS
OF CONTRA COSTA**

Volunteer Application

Please print or type

Name _____ Date _____

DOB _____ Address _____

City _____ Zip code _____

Home Phone _____ Work Phone _____

Occupation _____

Employer _____

Drivers License # _____ State _____

Emergency Contact _____ Relationship _____ Phone _____

Where did you learn about our volunteer opportunities? _____

SKILLS AND EXPERIENCES

What is your educational background? _____

What sort of hobbies, interests, and activities do you enjoy? _____

What is your occupation? _____

Do you have any past or present volunteer experience? If yes, please describe. _____

INTEREST INVENTORY

Please check the areas you would be most interested in volunteering in. Check as many as you would like!!

_____ Tutoring – Which subjects? _____

_____ Gymnasium Activity Assistant

_____ Arts and Crafts Activity Assistant

_____ Assisting with office and clerical work

_____ Computer Lab Assistant

_____ Playing board games Activities not listed above that I am interested in: _____

Is there a particular type of volunteer work in which you are interested?

_____ Working one-on-one with a single child

_____ Working directly with a Staff member as an Assistant

_____ Helping around the office in general administrative duties

_____ Working on group projects

_____ A variety of duties

_____ Facilitating trainings or workshops for children

AVAILABILITY

Please mark all of the days and times you will be available to volunteer.

	Monday	Tuesday	Wednesday	Thursday	Friday
Time Available					

COMMITMENT

What kind of commitment are you willing to make?

- One time 6 weeks to 3 months 3 months to 6 months
 6 months to 9 months 9 months to 1 year Other time commitment

ADDITIONAL INFORMATION

Please circle the applicable response to the following questions:

- Do you currently use illegal drugs? Yes No
- Have you ever been convicted of a criminal offense? Yes No
- Have you ever been convicted of child abuse or neglect, or is there a pending criminal charge against you for child abuse or neglect? Yes No
- Has your driver's license ever been suspended or revoked? Yes No
- Are there any other facts or circumstances involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young people? Yes No

(Please use a separate piece of paper to explain any "Yes" responses.)

UNDERSTANDING AND AUTHORIZATION

I certify that all the answers on the application and any attachments are true and complete to the best of my knowledge. I also certify that I have not withheld any pertinent information.

I agree that in the course of considering my application, you may inquire to verify information considering my background. I specifically authorize you to investigate all statements in this application. I authorize educational institutions, employers and references to give you any and all information concerning my education, employment, and fitness to work with children and young people. I further agree to release and hold harmless the Boys & Girls Clubs of Contra Costa, institutions and references listed above and any law enforcement agency, from all liability and any damage that may result from furnishing this information to you.

Signature _____ Date _____

REFERENCE RESPONSE (Non-Family Reference)

ATTENTION APPLICANT: Please type or print your name and the name and address of the person providing this reference.

Applicant _____

Name of Reference _____

Address _____ City/State/Zip _____

Home Phone _____ Work Phone _____

ATTENTION REFERENCE: The person named above is applying to participate in a volunteer program with the Boys & Girls Clubs of Contra Costa. If accepted, she/he will serve as a volunteer to the Club. Participating means hard work, adjusting to work conditions and working with people. The goal is to provide volunteers with on-site training and education in youth work.

We would appreciate it if you would frankly appraise the applicant's strengths and weaknesses. Please feel free to make any additional comments on this form and to attach additional sheets if necessary.

PLEASE RETURN THIS REFERENCE AS SOON AS POSSIBLE

1. In what capacity have you known the applicant? _____

How long have you known the applicant? _____ How well do you feel you know her/him? _____

2. Do you feel this individual is a positive role model for children? Yes _____ No _____

3. How do you feel this individual will work with children? _____

4. Is this individual reliable and punctual? Yes _____ No _____

5. What skills do you feel they can bring to our youth program? _____

6. Is there any reason you feel this individual should not work with children? _____

Signature _____ Date _____