

## **Program Volunteer Application**

The below information will be used to conduct a criminal background check and a driver's license check when youth are transported by a volunteer.

| SENERAL INFO     | DRMATION                                 |                  |          |  |
|------------------|--|------------------|----------|--|
| Full Name:       |  | Contact Number   | ( )      |  |
| Current          |  | Alternative #:   | ( )      |  |
| Address:         |  | E-mail Address:  | ,        |  |
|                  |  | Social Security  |          |  |
|                  |  | Number:          |          |  |
| Date of          |  |                  |          |  |
| Birth:           |  | Ethnicity:       |          |  |
|                  | List addresses for the                   | •                |          |  |
| Street           |  | <u> </u>         |          |  |
| Address:         |  |                  |          |  |
| City:            | State:                                   |                  | Zip:     |  |
| Street           |  |                  |          |  |
| Address:         |  |                  | <b>,</b> |  |
| City:            | State:                                   |                  | Zip:     |  |
| Street           |  |                  |          |  |
| Address:         |  |                  |          |  |
| City:            | State:                                   |                  | Zip:     |  |
| Street           |  |                  |          |  |
| Address:         |  |                  |          |  |
| City:            | State:                                   |                  | Zip:     |  |
| Street           |  |                  |          |  |
| Address:         | State:                                   |                  | 7:       |  |
| City:            | State.                                   |                  | Zip:     |  |
| EDUCATION IN     | SIEODM ATION                             |                  |          |  |
| School(s         |  | Degree Rec       | eived:   |  |
| Attended         |  | Degree Rec       |          |  |
| 1 100011000      | **                                       | Degree Received: |          |  |
|                  |  |                  | erred.   |  |
| CURRENT VOI      | LUNTEER INTEREST                         |                  |          |  |
|                  | erested in volunteering with this agency | v?               |          |  |
| ,, <u></u> , , , | 77-00-00 1                               | <i>y</i> .       |          |  |
|                  |  |                  |          |  |
|                  |  |                  |          |  |

## **REFERENCES**

List three references (not relatives) who have known you for at least one (1) year. Include complete mailing addresses.

| Address:    Belation:   E-mail Address:   Relation:   | - 437  |   |   |
|---|--|---|---|
| E-mail Address:   Relation:   | Full Name:   | Home Phone:   |   |
| Relation:   | Address:   |   |   |
| Full Name:  Address:  Be-mail Address:  Relation:  Full Name:  Address:  Be-mail Address:  Cother #:  E-mail Address:  Be-mail Address:  Cother #:  E-mail Address:  Relation:  I certify that all information on this application is true to the best of my knowledge and understand the information will be used to conduct a criminal background check. I also authorize the agency to contact the references listed above. In the event I supervise, or transport youth, a driver's licenses check will also be conducted.  I understand that any false statements, withheld information or negative feedback from reference(s) will be reason(s) to disqualify me from volunteering with this agency.  Volunteer Print and Sign:  Date:  FOR AGENCY USE ONLY  Date References checked: |  |   |   |
| Address:    B-mail Address:   |  | Relation:   |   |
| Address:    Be-mail Address:  |  | 1   | i |
| E-mail Address:   Relation:   |  |   |   |
| Full Name:  Address:  Address:  Certify that all information on this application is true to the best of my knowledge and understand the information will be used to conduct a criminal background check. I also authorize the agency to contact the references listed above. In the event I supervise, or transport youth, a driver's licenses check will also be conducted.  I understand that any false statements, withheld information or negative feedback from reference(s) will be reason(s) to disqualify me from volunteering with this agency.  Volunteer Print and Sign:  Date:  FOR AGENCY USE ONLY  Date References checked:   | Address:   |   |   |
| Full Name:  Address:  Other #:  E-mail Address:  Relation:  I certify that all information on this application is true to the best of my knowledge and understand the information will be used to conduct a criminal background check. I also authorize the agency to contact the references listed above. In the event I supervise, or transport youth, a driver's licenses check will also be conducted.  I understand that any false statements, withheld information or negative feedback from reference(s) will be reason(s) to disqualify me from volunteering with this agency.  Volunteer Print and Sign:  Date:  FOR AGENCY USE ONLY  Date References checked:   |  |   |   |
| Address:    Be-mail Address:  |  | Relation:   |   |
| Address:    Be-mail Address:  |  |   |   |
| E-mail Address: Relation:  I certify that all information on this application is true to the best of my knowledge and understand the information will be used to conduct a criminal background check. I also authorize the agency to contact the references listed above. In the event I supervise, or transport youth, a driver's licenses check will also be conducted.  I understand that any false statements, withheld information or negative feedback from reference(s) will be reason(s) to disqualify me from volunteering with this agency.  Volunteer Print and Sign:  Date:  FOR AGENCY USE ONLY  Date References checked:  | Full Name:   | Home Phone:   |   |
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| Date References checked:  | _  |   |   |
|   | Data References checked  | FOR AGENCY USE ONLY   |   |
|   | Staff Checking References:   |   |   |