

VOLUNTEER APPLICATION



BOYS & GIRLS CLUBS
OF METROPOLITAN PHOENIX

**Please provide all requested information – partial responses delay processing.
Please provide a copy of your current resume with your completed application.**

PERSONAL INFORMATION			
(Please Print) First Name	Middle	Last Name	Date of Application
Street Address			Home Telephone
City	State	Zip Code	Business Phone
Email Address: _____			Cell Phone
Have you ever been EMPLOYED with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, when? _____ Which location? _____			Are you at least 18 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No
How did you hear about us? <input type="checkbox"/> Friend/Family <input type="checkbox"/> Newspaper <input type="checkbox"/> BGCMP Website <input type="checkbox"/> Boys & Girls Club Fundraiser <input type="checkbox"/> Company / Professional Affiliation <input type="checkbox"/> Live Near Club <input type="checkbox"/> www.makeadifference.org <input type="checkbox"/> www.1-800Volunteer.org <input type="checkbox"/> Volunteer Fair <input type="checkbox"/> www.VolunteerMatch.org <input type="checkbox"/> Other _____ Did someone refer you to us? If yes, who (name) _____			Have you ever VOLUNTEERED with us before? <input type="checkbox"/> Yes <input type="checkbox"/> No At which club location and position: _____
Do you have a preferred location or club? Please Indicate: _____ If you are not sure please check off a regional area: <input type="checkbox"/> Central Phoenix <input type="checkbox"/> Northeast Phoenix <input type="checkbox"/> Northwest Valley <input type="checkbox"/> South Valley <input type="checkbox"/> Southwest Valley (Avondale/Tolleson) <input type="checkbox"/> West Valley			Emergency Contact Name: _____ Emergency Contact Phone Number: _____ Relation to you: _____

AVAILABILITY TO VOLUNTEER			
Day of the Week	Time of Day	Season	Commitment
<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday	<input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening	<input type="checkbox"/> Spring <input type="checkbox"/> Summer <input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> All Year	<input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> 3 - 8 weeks <input type="checkbox"/> 3 - 6 months <input type="checkbox"/> 6 - 12 months

Boys & Girls Clubs of Metropolitan Phoenix is an Equal Opportunity Employer

Boys & Girls Clubs of Metropolitan Phoenix
Volunteer Coordinator Phone: 602.954.8182 • Fax: 602.343.1310



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INDICATE [x] WHICH TYPE OF VOLUNTEERING YOU WISH TO PURSUE			
WORK DIRECT WITH CHILDREN	<input type="checkbox"/>	Requires a full, criminal background investigation and reference checks. May also include driving background check and drug testing.	Examples include: coach or referee sports activities; teach performing arts; assist with reading hour.
ASSIST WITH SPECIAL EVENTS	<input type="checkbox"/>	Contact with children is limited to supervised situations. No one-on-one contact with children without a criminal background investigation.	Examples include: fundraising; assist with organizing and running event.
WORK DIRECT WITH STAFF	<input type="checkbox"/>	No contact with children. Background check includes verification of credentials.	Examples include: provide administrative support; conduct specialized training or mentoring.
OTHER	<input type="checkbox"/>	Please explain:	

INDICATE [x] AREA(S) OF INTEREST			
Clubs' Core Program Areas	Boards	Administrative	Special Events
<input type="checkbox"/> THE ARTS: Fine Arts including Digital Arts, Performing Arts including Urban Arts <input type="checkbox"/> CHARACTER & LEADERSHIP: Torch Club, Keystone Club, Service to Community Activities <input type="checkbox"/> EDUCATION & CAREER DEVELOPMENT: Computers, Tutoring, Homework Help, Mentoring <input type="checkbox"/> HEALTH & LIFE SKILLS: Nutrition Education, Social Skills Development, Cooking Skills <input type="checkbox"/> SPORTS, FITNESS & RECREATION: Coach Team & Individual Sports, Hiking, Golf, Tennis	<input type="checkbox"/> Board Involvement	<input type="checkbox"/> Clerical Help <input type="checkbox"/> Data Entry <input type="checkbox"/> Consulting (i.e. financial analysis) <input type="checkbox"/> Graphic Design/Photography <input type="checkbox"/> Information Fair Representative <input type="checkbox"/> Translations into Spanish	<input type="checkbox"/> Auctions <input type="checkbox"/> Golf Tournaments <input type="checkbox"/> Youth of the Year Celebration (Winter) <input type="checkbox"/> National Kids Day (Fall) <input type="checkbox"/> Club In the Park (Spring)

TRAINING/SKILLS
<p>The above is only a sampling of volunteer opportunities at the Boys & Girls Clubs of Metropolitan Phoenix. Please list any special skills or areas of interest that were not represented above – the back of this sheet may be used if needed:</p>
<p>Are you Bilingual? No <input type="checkbox"/> Yes <input type="checkbox"/> If so, what language do you speak or write?</p>

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CURRENT (OR LAST) EMPLOYER	
Company Name	Telephone ()
Supervisor	Telephone ()
Address	Employed (month & year) From: To:
Job Title:	<input type="checkbox"/> Full time job <input type="checkbox"/> Part time job <input type="checkbox"/> Seasonal job
List Job Responsibilities:	Web Site:

REFERENCES			
Complete information for at least three references. Former employers/supervisors are preferred.			
Name	Kind of Reference (Personal or Professional)	How do you know this person? (e.g. Supervisor, Co-Worker, Friend, please explain)	Phone Number (REQUIRED)

Disclosure Section

My signature below certifies:

- All statements and information submitted on this application are true and correct.
- BGCMP is authorized to conduct reference check(s) as part of a background investigation.
- I understand BGCMP is an At-Will employer.

Applicant Signature

Date Signed

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Valley of the Sun
United Way



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AUTHORIZATION: CRIMINAL BACKGROUND INVESTIGATION

The Boys & Girls Clubs of Metropolitan Phoenix requires all current staff, volunteers and applicants being considered for employment to undergo a criminal background investigation.

Results gathered from the criminal background check may be cause for immediate disqualification from the employment process and any volunteer activities.

The following crimes are of particular concern:

- Sexual conduct, abuse, exploitation or molestation of a minor
- Commercial sexual exploitation of a minor
- Contributing to the delinquency of a minor
- Crime against children
- Larceny, burglary, robbery
- Manslaughter, murder
- Felony or misdemeanor offenses involving the possession, sale, distribution, transportation or use of marijuana, dangerous drugs or alcohol
- Incest
- Kidnapping
- Arson
- Assault or aggravated assault
- Domestic violence
- Crimes involving weapons

- Have you ever been convicted of, admitted committing, or are you awaiting trial for any of the above, or similar, crimes? YES _____ NO _____
- Have you been arrested for any crime within the past three (3) years?
YES _____ NO _____

I authorize the Boys & Girls Clubs of Metropolitan Phoenix, and any agency they may contact, to conduct a complete criminal background investigation. I also release such agencies from liability for any information that they may provide.

I certify that the above answers and information are true and correct:

PRINT NAME

SIGNATURE

Date

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BGCMP CONFIDENTIALITY STATEMENT

While volunteering with the Boys & Girls Clubs of Metropolitan Phoenix, information about the lives, abilities, and concerns of youth may be shared with you. This information is of a confidential nature.

You must understand and respect the rights of privacy of our members and their families.

You are required to use sound judgment in handling confidential information, including reproducing copies of documents or disseminating information inside or outside the organization.

Similar to a BGCMP employee, you as a volunteer are bound by a code of ethics to keep confidential matters within the confines of this organization.

You may not discuss such information with anyone who does not have a professional right to know.

I understand and will abide by the BGCMP policy of confidentiality as stated above.

Print Name

Signature

Date

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