

VOLUNTEER APPLICATION



**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

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Boys & Girls Clubs of Metropolitan Phoenix
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INDICATE [x] WHICH TYPE OF VOLUNTEERING YOU WISH TO PURSUE			
WORK DIRECT WITH CHILDREN		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		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		No contact with children. Background check includes verification of credentials.	Examples include: provide administrative support; conduct specialized training or mentoring.
OTHER		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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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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Valley of the Sun
United Way



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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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VOLUNTEER OFFER LETTER

Dear Volunteer:

Thank you for volunteering your time, talents and energy in support of the Boys & Girls Clubs of Metropolitan Phoenix efforts to provide quality services to the children of our community.

Boys & Girls Clubs of Metropolitan Phoenix must be vigilant in providing safe and secure services to the children served. Boys & Girls Clubs of Metropolitan Phoenix wishes to be clear about the conditions under which you will be volunteering, and asks that you review the following:

- You are asked to comply with company policies and practices as they relate to appropriate procedures and behavior with children and staff.
- As a volunteer you will not receive compensation or benefits for your services. Further, you are not covered under the Boys & Girls Clubs of Metropolitan Phoenix Worker's Compensation plan.

Boys & Girls Clubs of Metropolitan Phoenix looks forward to you joining our team and thanks you in advance for your charitable support of our organization. Your signature below indicates your acceptance of these volunteer terms and conditions.

I accept the terms and conditions of Volunteer status with the Boys & Girls Clubs of Metropolitan Phoenix including authorization to conduct pre-volunteer criminal background screening, drug testing for volunteers transporting youth, and reference check investigations.

Name: _____
Print First Middle Last

Signature: _____ Date: _____

Required to process criminal background search:

Social Security Number

Date of Birth

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BGCMP Volunteer Release and Waiver of Liability

I, _____, agree to the terms of this Release and Waiver of Liability form.
(PRINT first and last name)

Please initial each of the boxes below, and sign your name below:

I hereby release the BGCMP, its employees, officers, volunteers, and agents from any and all claims, demands, rights, and causes of action that may arise from my volunteer work with the BGCMP. I am assuming the risk for any mental or physical harm I might incur.

I understand that it is my desire to further the work of the BGCMP by performing services as a volunteer. I will undertake these services as a volunteer without compensation plan, I acknowledge that I am not acting as an employee of the BGCMP. I also acknowledge that I would not be covered under the BGCMP Worker Compensation plan.

I agree that all personal possessions/property kept in the BGCMP buildings, on BCGMP property, and on any property used by the BCMP are my own responsibility. BGCMP will not be held liable for any damage, loss or theft.

I understand that BGCMP provides charitable services to the public and does not pre-screen members.

I acknowledge that I have had full opportunity to read this document and to seek legal advice should I choose. I agree that this agreement is intended to be as broad as permitted by the laws of the state of Arizona. I have carefully read this liability waiver and I fully understand its contents. I accept the terms and conditions of volunteer statues with the boys & Girls Clubs of Metropolitan Phoenix including authorization to conduct pre-volunteer criminal background screening, drug testing for volunteers transporting youth, and reference check investigations.

Print Name

Signature

Date

Witness Name

Witness Signature

Date

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EQUAL EMPLOYMENT OPPORTUNITY DISCLOSURE

The Boys & Girls Clubs of Metropolitan Phoenix affirms that we provide equal employment opportunity to applicants, employees and volunteers in all personnel actions including:

- Recruit, hire, train and promote persons in all job classifications without regard to race, color, religion, sex, national origin, disability, age or veteran status.
- Base decisions on employment so as to further the principles of equal employment opportunity.
- Ensure that all other personnel activities such as compensation, benefits, transfers, layoffs, return from layoff, company-sponsored training, social and recreational programs, will be administered without regard to race, color, religion, sex, national origin, disability, age or veteran status.

We are required to supply the following information about our employees and volunteers when we apply for federal grants and for various agency reports. Please take a moment to complete the following:

Please choose ONE of the following:

- American Indian or Alaska Native
- Asian
- Black or African American
- Hispanic or Latino
- Native Hawaiian or Other Pacific Islander
- White
- Two or More Races

Disabled/Veteran Status (please mark if applicable):

- Individual with a disability: A person who has a physical or mental impairment, which substantially limits one or more of such person's major life activities.

Please list any accommodation you may require to perform the essential functions of your job:

- Disabled Veteran: A person entitled to disability compensation under laws administered by the Veterans Administration for a disability rated at 30% or more.
- Veteran of Vietnam Era: A person who served on active duty for a period of more than 180 days between 8/5/64 and 5/7/75.

VOLUNTEER NAME: _____ Male _____ Female _____

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