

# Volunteer Application



**BOYS & GIRLS CLUBS**  
of Northeast Alabama, Inc.

Name \_\_\_\_\_ SS# \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ DOB \_\_\_\_\_

Driver's License: State \_\_\_\_\_ Number \_\_\_\_\_ Expiration \_\_\_\_\_

Where did you learn of our volunteer opportunities? \_\_\_\_\_

## SKILLS & EXPERIENCE

What is your educational background? \_\_\_\_\_

What is your occupation? \_\_\_\_\_

Do you have any volunteer experience? \_\_\_\_\_ if so, please describe \_\_\_\_\_

## INTEREST INVENTORY

Please check the area(s), which interest you. Check all that apply.

\_\_\_ Tutoring – subjects? \_\_\_\_\_

\_\_\_ Sports Coach/Assistant – what sports? \_\_\_\_\_

\_\_\_ Music Leader/Assistant – what type? \_\_\_\_\_

\_\_\_ Arts & Crafts

\_\_\_ Computer Use Instruction

\_\_\_ Reading

\_\_\_ Board Games

\_\_\_ Fund Raising Assistance

\_\_\_ Recreational Activity Leader

\_\_\_ Mentoring

\_\_\_ Discussion Group Leader

\_\_\_ Office or Clerical Work

\_\_\_ Chaperone

If you are interested in an area not listed here, please tell us \_\_\_\_\_

## REFERENCES

Please list your current employer and two non-related references that can attest to your character.

Employer \_\_\_\_\_ Phone \_\_\_\_\_

Reference \_\_\_\_\_ Phone \_\_\_\_\_

Reference \_\_\_\_\_ Phone \_\_\_\_\_

Members of the Boys & Girls Clubs are males and females ages 6 – 18. Which gender and age group would you prefer? Check as many as you like.

Boys       Girls       no preference  
 6 -9       10 – 13       14 – 16       17 -18       no preference

Would you prefer?

working one on one       group activities  
 Office or clerical work       assisting staff members  
 No preference

**AVAILABILITY**

Please tell us the days and times when you are most available to work.

Monday – hours \_\_\_\_  
 Tuesday – hours \_\_\_\_  
 Wednesday – hours \_\_\_\_  
 Thursday – hours \_\_\_\_  
 Friday – hours \_\_\_\_

**COMMITMENT**

What type of volunteer commitment are you willing to make?

one time only       one month  
 3 – 6 month       6-9 month  
 9 month to one year       other \_\_\_\_\_

**ADDITIONAL INFORMATION**

Please circle the appropriate response.

Do you 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 either?      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?

**(Please explain any “yes” answers on a separate sheet of paper.)**

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**I attest that the information given here is true. I understand that a criminal background check may be performed prior to my service and authorize all listed as references to give information as it pertains to my volunteer service.**

Signed \_\_\_\_\_ Date \_\_\_\_\_