

|  |  |  |
| --- | --- | --- |
| **OFFICE USE** | Requested By\_\_\_\_\_\_\_\_\_\_ | Due\_\_\_\_\_\_\_\_\_ |
| Current COMET Status | □ New □ Member □Parent □Child Prof |
| Orientation Completed Date\_\_\_\_\_\_\_\_\_\_\_\_ |
| Bkgrnd Ck Date |  | Results |  |
| COMET ID |  | □ ID tag made |

Downtown: 543 CENTER ST • SANTA CRUZ, CA 95060 • 831-423-3138 www.boysandgirlsclub.info

Live Oak: 855 17th Ave • SANTA CRUZ, CA 95062 • 831-753-6565 ext 123 bgcsantacruz@gmail.com

# **ADULT VOLUNTEER APPLICATION**

(Please Print)

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_**\_ **Phone (Home):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Phone (Cell):** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **E-mail:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**State:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Zip:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Age Group: (20s, 30s, 40s, 50s, 60s, 70s)**

### At which Clubhouse are you most interested in volunteering? Downtown Live Oak

### Are you interested in participating as a long- or limited-term weekly volunteer? Yes No

If yes, what area(s) of programming interest you most?

  Education/Tutoring  Games Room  Pre-School/Kinder Buddy

  Fine Arts/Crafts  Technology/Computers Music/Performing Arts

  Sports/Fitness  Teen Programs  Gardening

  Fundraising/ Special Events  Board Member  Admin/Development

**Please fill in the days and times that you are available to volunteer.\***

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Monday | Tuesday | Wednesday | **Thursday** | Friday | Saturday |
| Times |  |  |  |  |  |  |

 *\*Limited volunteer opportunities exist after 6:00 pm. Clubs are closed on weekends.*

Total number of hours each week you are available to volunteer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Estimated length of commitment (e.g. 3 months, 6 months, indefinitely, etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**List any special skills, areas of knowledge and/or experience (including non-English languages):**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**List any previous volunteer experiences (include name of organization) or experience working with youth.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

 Name and address of employer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_­\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Are you a College/University student? Yes No

 Name & location of school:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are you volunteering as part of a Service-Learning course or program?** Yes No

 If yes, please provide the following: Course title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Instructor’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Instructor’s phone # or email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please provide two personal references.**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

How did you learn of Boys & Girls Clubs of Santa Cruz County?

### Are you a former member of a Boys & Girls Club? Yes No

If yes, what was the name and location of the club?

Are you volunteering as part of a corporate/community program or organization? Yes No

If yes, what is the name of the program/organization?

**What size t-shirt do your wear? Small Medium Large XL 2XL**

***NOTE:*** *Providing the following information is strictly voluntary and confidential. It allows us to better assess our community outreach and is not used in any manner to make decisions or judgments regarding a prospective volunteer.*

**Gender:**  Female  Male

Race/Ethnicity:

 Asian/Pacific Islander  Black, non-Hispanic  Native American/Native Alaskan

 South Asian  Hispanic/Latino  Mixed-Ethnicity

 Middle Eastern/North African  White, non-Hispanic  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing this document I am aware that Boys & Girls Clubs of Santa Cruz County may contact the above listed references.

Applicant Signature: Date:

**PLEASE RETURN COMPLETED APPLICATIONS TO:**

BOYS & GIRLS CLUBS OF SANTA CRUZ COUNTY

 Downtown Clubhouse: Live Oak Clubhouse:

 543 CENTER ST 885 17th  AVE

 SANTA CRUZ, CA 95060 SANTA CRUZ, CA 95062

 (831) 423-3138 (831) 475-6565 ext 123



|  |  |
| --- | --- |
| Requested By: |  |
| Due Date: |  |
| Bkgrnd Chk Date: |  |
| Results:  |  |

AUTHORIZATION AND RELEASE FORM TO CONDUCT A BACKGROUND CHECK

I, the undersigned applicant, do hereby authorize the Boys & Girls Clubs of Santa Cruz County, as applicable, by and through its independent contractor, First Advantage, to conduct a background investigation on me.

The above-mentioned background investigation may include, but is not limited to, employment and education verifications, social security verification, driving record information, and criminal history. I further understand that an unacceptable background check may result in the discontinuation of the hiring process or volunteer and/or coaching process.

I understand that I am entitled to a complete and accurate disclosure of the nature and scope of any criminal background search prepared on me upon written request of First Advantage within a reasonable time after the date of such search.

I further authorize any person, business entity, or governmental agency that may have information related to the above to disclose the same to the Boys & Girls Clubs of Santa Cruz County, by and through First Advantage, including but not limited to, any courthouse, any public agency, and law enforcement agencies regardless of whether such person, business entity, or governmental agency compiled the information itself or received it from other sources.

I hereby release the Boys & Girls Clubs of Santa Cruz County, First Advantage, and any and all persons, business entities, and governmental agencies, whether public or private, from any and all liability, claims and/or demands of whatever kind, by me, my heirs, or others making such claim or demand on my behalf, for procuring, selling, providing, brokering, and/or assisting with compilation or preparation of the background information check hereby authorized. I hereby give my permission to share any unacceptable finding to the managing general agent requesting my appointment.

Please PRINT CLEARLY.

Applicant/Volunteer Name Other Names Used

\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth Current Address (students: please use permanent address)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Street \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security Number Apt # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Driver’s License Number (if requested)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_