



OFFICE USE	Requested By _____	Completed _____
	Training Status	<input type="checkbox"/> New <input type="checkbox"/> Returning
	Orientation Completed Date _____	
	FA Ck Date _____	Results _____
	Live Scan Ck date _____	

Downtown Santa Cruz: 250 CALIFORNIA ST • SANTA CRUZ, CA 95060 • 831-423-3138  
 Live Oak: 925 17<sup>TH</sup> AVE • SANTA CRUZ, CA 95062 • 831-477-4095  
 Scotts Valley: 5060 SCOTTS VALLEY DR • SCOTTS VALLEY, CA 95066 • 831-535-7017

www.boysandgirlsclub.info  
 Volunteer@boysandgirlsclub.info

## ADULT VOLUNTEER APPLICATION

(Please Print)

Name: \_\_\_\_\_ Phone (Home): \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone (Cell): \_\_\_\_\_  
 City: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_ Birthday: \_\_\_\_\_ Age: \_\_\_\_\_

At which Clubhouse are you most interested in volunteering?  Downtown/SantaCruz  Live Oak  Scotts Valley

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?

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Education/Tutoring          | <input type="checkbox"/> Games Room             | <input type="checkbox"/> Pre-School/Kinder Buddy |
| <input type="checkbox"/> Fine Arts/Crafts            | <input type="checkbox"/> Technology/Computers   | <input type="checkbox"/> Music/Performing Arts   |
| <input type="checkbox"/> Sports/Fitness/Basketball   | <input type="checkbox"/> Teen Program           | <input type="checkbox"/> Gardening               |
| <input type="checkbox"/> Fundraising/ Special Events | <input type="checkbox"/> Board Member           | <input type="checkbox"/> Admin/Development       |
|  | <input type="checkbox"/> Driving/Transportation |  |

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 most 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):

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

Have you ever worked for, volunteered with, or been affiliated with this or any other Boys & Girls Club, or with any other youth-serving organization? If yes, please list each organization and include the name, phone number, and email of a contact who can verify your involvement.

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

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

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

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

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 three Character/Professional references. These should be individuals that have already been notified.

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

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

Have you ever been affiliated with the Boys & Girls Clubs of Santa Cruz County or any other Boys and Girls Club?  Yes  No

If yes, please list the name and location of the club and what you affiliation is/was.

Do you have the ability to pass a background check?  Yes  No

If no, please explain why:

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 you 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:  Woman  Man  Non-Binary  Self-Describe: \_\_\_\_\_

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

California St Clubhouse:  
250 CALIFORNIA ST  
SANTA CRUZ, CA 95060  
(831) 423-3138

Live Oak Clubhouse:  
925 17th AVE  
SANTA CRUZ, CA 95062  
(831) 477-4095

Scotts Valley Clubhouse  
5060 SCOTTS VALLEY DR  
SCOTTS VALLEY, CA 95066  
(831) 535-7017