

BOYS CLUB OF SIOUX CITY, INC. VOLUNTEER APPLICATION

**Prospective volunteers will receive consideration without discrimination
because of race, creed, color, sex, age, national origin or handicap.**

Date this application is being submitted _____

Name _____

Street Address _____ Home Phone _____

City _____ State _____ Zip Code _____

Social Security # _____ Birthday _____

_____ Yes _____ No Have you ever been arrested for Child Abuse

_____ Yes _____ No Do you have a Criminal Record

(We do conduct a criminal record check on volunteers)

_____ Yes _____ No Are you currently abusing alcohol or using drugs

Driver license number _____

List all health related conditions you have that might affect your ability to be involved in
physical activities with boys. _____

**Personal References: List the names of two individuals that we can contact
regarding your character and quality of work.**

1. Name _____ Address _____

City _____ State _____ Zip Code _____

2. Name _____ Address _____

City _____ State _____ Zip Code _____

List the Skills you have which would help you in the position you are volunteering for:

OVER

EMPLOYMENT HISTORY:

Company Name: _____

Address: _____ City/State/Zip: _____

Name of Supervisor: _____ Tel. Number: _____

State Job Title and Describe Your Work: _____

All the information on this volunteer application is correct: _____

I acknowledge that I have received and read the Volunteer Policy and agree to the Volunteer Policy guidelines, obligations and restrictions that apply to them.

Sign & Date

I also give permission for the Boys Club of Sioux City to conduct a criminal history record check in connection with my application. I understand that any information obtained will be held in strict confidence.

Sign & Date