

## BOYS & GIRLS CLUBS OF SIOUXLAND, INC. VOLUNTEER APPLICATION

Prospective volunteers will receive consideration without discrimination because of race, creed, color, age, sexual orientation, gender identity, national origin or handicap.

Date	e this application	is bei	ng submitt	ed	
Wha	at type of volunte	eer are	you? (circl	<i>e one)</i> Service Lea	rning or Community Volunteer
	at area of the Clu reation, Educatio		•	to volunteer for? ( reas	(circle one)
Nam	ne				
Street Address			Contact Phone #		
City_				State	Zip Code
Social Security #		Birthday			
E-Ma	ail #:				
	Yes	_No	Have you	u ever been arrest	ted for Child Abuse
	Yes	_No	Do you h	nave a Criminal Re	cord
			(We con	duct criminal reco	rd checks on volunteers)
	Yes	_No	Are you	currently abusing	alcohol or using drugs
			Driver lic	cense number	
			-	_	fect your ability to be involved in
	sonal Referend Ording your chara				uals that we can contact
1.	Name			Address	
	City		State	Zip Code	Phone #
2.	Name			Address	
	City		State	7in Code	Phone #

List the Skills you have which would help you in the position you are volunteering for:				
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 & Girls Clubs of Siouxland to conduct a criminal history				
record check including violent crimes, sex crimes, financial crimes, drug crimes and				
miscellaneous crimes in connection with my application. A social security number				
validation also with be checked. I understand that any information obtained will be held				
in strict confidence.				