



**BOYS & GIRLS CLUBS
OF SYRACUSE**

Volunteer Application

I am volunteering as: ____ an individual ____ a volunteer group

Date: _____

Name: _____

Group Name (if applicable) _____

If group, how many volunteers? _____

Contact Person _____

Address: _____

City/State/Zip: _____

Phone _____ Date of Birth _____ SS# _____

Cell: _____ Email _____

Employer _____

Address _____ City/State/Zip _____

Phone _____

Emergency Contact _____ Telephone _____

Relationship _____

Where did you learn about our volunteer opportunities? _____

Why are you (or group) interested in volunteering?

Volunteering for necessary educational credit? (Circle one) YES or NO

How many hours are you required to fulfill? _____

Skills and Experience

Educational background _____

Hobbies, interests and skills _____

Any past/present volunteer experience _____

References (please include current employer)

1 Name _____ Telephone _____ Relationship _____

2 Name _____ Telephone _____ Relationship _____

Statement of Agreement

I am interested in serving as a volunteer. I will hold the Boys & Girls Clubs of Syracuse blameless if I am in any way injured during my work as a volunteer. As a volunteer applicant, I also understand that the Boys & Girls Clubs of Syracuse must conduct a criminal background check. I also give the Boys & Girls Clubs of Syracuse permission to contact listed references.

Applicant _____ Date: _____

Signature of parent or guardian (if under 18): _____



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Check those areas for assignment where you have experience or interest.

Fundraising or Administration:

Answering/Making Phone Calls Filing Computer Programming Auction Mailings
 Hoops for Hope Clubhouse Classic Marketing

Professional or Program:

Teen Programming Computer Training Sports Programs Public Speaking
 Prevention Programs Fine Arts Visual Arts Mentoring Tutoring Photography
 Game Room Activities Teaching/

Maintenance:

Cleaning Electrical Painting Lawn Maintenance Heat & Air Maintenance

List any additional achievements, abilities or activities that you consider relevant to your request such as computer language or software programs, foreign language (proficiency in speaking and/or writing), etc.

Location Preference

Check those locations where you would like to work:

Admin Office
 E Fayette Street Club
 Shonnard Street Club
 Central Village
 No Preference

Availability:

Day	Monday	Tuesday	Wednesday	Thursday	Friday
Time Available					

What kind of minimum time commitment are you willing to make?

One time Weekly for Two Months
 Weekly for One Year Other Time Commitment

Note: Volunteers are not permitted to start at a site until the background check is processed and cleared



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Background Check VOLUNTEER Information

VOLUNTEER NAME:

First

Last

Middle

CURRENT ADDRESS:

DATE OF BIRTH:

SOCIAL SECURITY #:



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**VOLUNTEER
DISCLOSURE AND CONSENT FORM**

In accordance with applicable federal and state laws, including the Fair Credit Reporting Act (15 U.S.C.A. §§ 1681, *et seq.*), and the social services law, you are hereby notified that in connection with and in order to better evaluate your application for employment, volunteer service or employment status, reports may be obtained which will provide applicable information concerning your criminal history, sex offender and child abuse registry status, character, general reputation, personal characteristics, or mode of living. On request, you will be informed if such reports have been requested, and the name and address of the agency furnishing such reports, if any.

AUTHORIZATION TO OBTAIN CONSUMER REPORT

I, _____, pursuant to applicable federal and state laws such as the Fair Credit Reporting Act, 15 U.S.C.A. §§ 1681b(b)(2)(A)(ii), and the social services law, hereby authorize Boys & Girls Clubs of Syracuse and/or its representatives, to obtain reports pertaining to my background, including national Sex Offender Registry, Local and Statewide Criminal History and Social Security Trace/Verification, for employment or volunteer purposes. Additionally, I understand that reports on my character, general reputation, personal characteristics, or mode of living will be obtained in order to evaluate my opportunities for continued or prospective volunteer placement or employment.

I acknowledge receipt of a copy of Article 23-A of the New York Correction Law.

I understand that this information will remain confidential and will be utilized for employment purposes only.

Signature of Employee/Applicant

Social Security Number

Date