

**Boys & Girls Clubs of Wichita Falls
Volunteer Application**

Club: _____

Please print or type

Date: _____

Name: _____

Address: _____ City _____ Zip _____

Home Phone: _____ Work Phone: _____ DOB: _____

Emergency Contact: _____ Relationship: _____ Phone: _____

Where did you learn about our volunteer opportunities? _____

Have you ever been convicted of, pled guilty to (includes deferred adjudication), and/or pled nolo contendere (includes deferred adjudication) to any misdemeanor, gross misdemeanor, or felony crimes against children or other persons?
YES NO (Please Circle)

Have you ever been convicted of, pled guilty to (includes deferred adjudication), and/or pled nolo contendere (includes deferred adjudication) to any crime involving the use, sale, manufacture, possession, or transportation of any controlled substance or prescription drug? YES NO (Please Circle)

Have you ever been convicted of, pled guilty to (includes deferred adjudication), and/or pled nolo contendere (includes deferred adjudication) to any misdemeanor or felony crimes involving bodily harm to another person? YES NO
(Please Circle)

Have you ever been convicted of, pled guilty to (includes deferred adjudication), and/or pled nolo contendere (includes deferred adjudication) to any crime involving sexual activity or indecency? YES NO (Please Circle)

Have you ever been convicted of, pled guilty to (includes deferred adjudication), and/or pled nolo contendere (includes deferred adjudication) to any crime, including misdemeanors? YES NO
(Please Circle)

If yes to any of the above questions, PLEASE EXPLAIN (state, date, court, type of crime, place of occurrence, disposition)

PLEASE NOTE: A detailed criminal background check will be conducted on all volunteer applicants. Any omission or falsification of past criminal history including DEFERRED ADJUDICATION will be grounds for rejection of application or dismissal from subsequent volunteer assignment.

SKILLS AND EXPERIENCES

What sorts of hobbies, interests and activities do you enjoy?

What is your occupation/profession?

Do you have any past or present volunteer experience? If yes, please describe.

INTEREST INVENTORY

This section will help you determine what volunteer activities you might like to participate in. Please check the area(s) that interest you. Check as many or as few as you like!

I would enjoy:

Tutoring – Which Subjects?

Sports Coach/Assistant – Which Sport(s)?

Music Leader/Assistant – Which Types?

Arts and Crafts Activity Assistant/Instructor

Helping a Child Use a Computer

Listening to a Child Read

Playing Board Game

Assisting with Fundraising

Leading a Recreational Activity

Acting as a Mentor

Leading a Discussion Group

Assisting with Office and Clerical Work

Chaperoning a Field Trip

Activities not Listed Above that I Am Interested in:

Preferences In Volunteering

Members of the Boys & Girls Clubs are ages 6 to 18. Which age groups would you most enjoy working with?

Check as many as you like!

- | | | |
|---|---|---|
| <input type="checkbox"/> 6 to 8 Year Olds | <input type="checkbox"/> 9 to 10 Year Olds | <input type="checkbox"/> 11 to 12 Year Olds |
| <input type="checkbox"/> 13 to 15 Year Olds | <input type="checkbox"/> 16 to 18 Year Olds | <input type="checkbox"/> Does not Matter |

Is there a particular type of volunteer work in which you are interested?

Check all that apply to you.

- | | |
|---|---|
| <input type="checkbox"/> Working One-on-One with a Single Child | <input type="checkbox"/> Working Directly with a Staff Member as an Assistant |
| <input type="checkbox"/> Helping Around the Office in General | <input type="checkbox"/> Working on Group Projects |
| <input type="checkbox"/> A Variety of Duties | <input type="checkbox"/> Facilitating Trainings or Workshops with Children |
| <input type="checkbox"/> No Preference | |

Availability

This section will help determine the best days and times for your volunteer activity. Please mark all the days and times you will be available to volunteer.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Time Available							

Commitment

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

- | | | |
|--|---|--|
| <input type="checkbox"/> One Time | <input type="checkbox"/> 6 Weeks - 3 Months | <input type="checkbox"/> 3 months - 6 Months |
| <input type="checkbox"/> 6 Months - 9 Months | <input type="checkbox"/> 9 Months - 1 Year | <input type="checkbox"/> Other Time Commitment |

Are there any physical limitations or are you under any course of treatment which might limit your ability to perform certain types of activities?

PERSONAL REFERENCES: Give your references listing persons who have known you for a number of years and can provide information concerning your **character and background**. These may include your former teachers, principals, coaches, former employers, long-time friends, clergy, and community leaders.

NAME	OCCUPATION	ADDRESS (street, city, state, zip)	TELEPHONE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

EMPLOYMENT HISTORY (read entire paragraph carefully): Please list all work history for the **PREVIOUS TEN YEARS**. If work history is less than 10 years, list the remainder of the past 10 years that you were unemployed and/or a student and/or volunteer. If more space is needed, additional sheets may be attached. You must account for the past **TEN YEARS**.

1. Name and address of Company or Employer: _____

Name of supervisor(s): _____ Telephone: _____

Dates you were employed: From: _____ To: _____ Full-time: _____ Part-time: _____

Position: _____ Duties and responsibilities: _____

Reason for leaving: _____

2. Name and address of Company or Employer: _____

Name of supervisor(s): _____ Telephone: _____

Dates you were employed: From: _____ To: _____ Full-time: _____ Part-time: _____

Position: _____ Duties and responsibilities: _____

Reason for leaving: _____

3. Name and address of Company or Employer: _____

Name of supervisor(s): _____ Telephone: _____

Dates you were employed: From: _____ To: _____ Full-time: _____ Part-time: _____

Position: _____ Duties and responsibilities: _____

Reason for leaving: _____

**BOYS & GIRLS CLUBS OF WICHITA FALLS
CONSENT FOR CRIMINAL BACKGROUND HISTORY CHECK
AUTHORIZATION/WAIVER/INDEMNITY**

I hereby give my permission in exchange for good and valuable consideration for the Boys & Girls Clubs of Wichita Falls to obtain information relating to my criminal history record.

I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history records check may be repeated at any time.

I, the undersigned, do, for myself, my heirs, executors and administrators, hereby remise, release and forever discharge and agree to indemnify and defend the Boys & Girls Clubs of Wichita Falls and each of their officers, directors, employees, and agents and hold them harmless from and against any and all causes of actions, suits, liabilities, costs, debts and sums of money, claims and demands whatsoever (including claims for the negligence, gross negligence, and/or strict liability of the Boys & Girls Clubs of Wichita Falls), and any and all related attorneys= fees, court costs, and other expenses resulting from the investigation of my background in connection with my application to become a volunteer/staff member.

The following is my true and complete legal name and all information is true and correct to the best of my knowledge:

First Name Middle Last Name

Maiden Name or Other Names Used

Present Address

How long?

City State Zip

Former Address

How long?

City State Zip

Date of Birth

Social Security Number

Driver's License Number

State of DL

Sex: Male Female
 (Please Circle)

Race: White Black Hispanic Asian Other
 (Please Circle)

Signature

Date