



BOYS & GIRLS CLUBS
OF THE MIDLANDS

OMAHA • CARTER LAKE • COUNCIL BLUFFS

VOLUNTEER SERVICE APPLICATION

Check Unit:

<u>__North Unit</u>	<u>__South Unit</u>	<u>_Carter Lake Unit/Camp</u>	<u>__Westside</u>	<u>__Mount View Unit</u>	<u>__Council Bluffs Unit</u>
Dave Felici	Francisco (Paco) Fuentes	Josh Towey	Shelli Henry	Tom Linnell	Chris Peterson
2610 Hamilton Street	5051 South 22 Street	4101 North 17 Street	1414 Robertson Drive	5322 North 52 Street	815 North 16 Street
Omaha, NE 68131	Omaha, NE 68107	Carter Lake, IA 51510	Omaha, NE 68114	Omaha, NE 68104	Council Bluffs, IA 51501
(402)342-2300	(402)733-8333	(712) 347-5687	(402)932-6477	(402)208-3833	(712) 256-5603
	<u>__Morton CLC</u>		<u>__King Science CLC</u>		
	<u>Terrance Badgett</u>		Angela Reed		
	4606 Terrace Drive		3720 Florence Blvd		
	Omaha, NE 68134		Omaha, NE 68110		
	(402)557-4700		(402)557-3720		

Date: _____

PERSONAL INFORMATION

Name: _____
Full First Name Middle name Last name

Address: _____

City: _____ State: _____ Zip-Code: _____

How long have you lived at this address? _____

Home Phone: _____ Work Phone: _____

Emergency Contact: _____

Relationship: _____ Phone: _____

Parent or Guardian, If Under 19: _____

Where Did You Learn About Our Volunteer Opportunities? _____

Are You Seeking To Volunteer To Satisfy Court-Ordered Community Service? _____

EDUCATION BACKGROUND

High School and year graduated _____

College(s) and year graduated _____

SKILLS AND INTERESTS

What Hobbies, Interests and Activities Do You Enjoy?

Do You Have Past or Present Volunteer Experience? If Yes, Please Describe. _____

EMPLOYMENT HISTORY

Occupation: _____

Current Employer: _____

Address: _____

Telephone: _____ Position: _____

Supervisor: _____

Employment dates: _____

Employer: _____

Address: _____

Telephone: _____ Position: _____

Supervisor: _____

Employment dates: _____

Employer: _____

Address: _____

Telephone: _____ Position: _____

Supervisor: _____

Employment dates: _____

AREA of INTEREST

I would enjoy working directly with the kids in this/these areas:

Education Center

Arts and Crafts Activity

Games Room

Chaperoning a field trip

Gym/Weight Room

Assisting with Office/Clerical work

Teen Center

PREFERENCES IN VOLUNTEERING (check as many as you like)

Members of the Boys & Girls Clubs are ages 6 to 18.

Which age groups would you most enjoy working with?

6-7 year olds

8-10 year olds

11-12 year olds

13-15 year olds

16-18 year olds

Does not matter

REQUEST TO BECOME A MENTOR

Do you prefer to be matched with: (check one) Male Female No preference

I would like to work with a child in grade (check one): Elementary School: 1 2 3 4 5

Middle School: 6 7 8 High School: 9 10 11 12

I would enjoy working in the admin/office area:

Clerical work (filing, faxing, copying, ext.)

Assisting with special projects/fundraisers

Data Base Management (experience in this field required)

Activities not listed above that I am interested in: _____

AVAILABILITY

Indicate Days And Times You Are Available For Volunteer Service.

	Monday	Tuesday	Wednesday	Thursday	Friday
Start time:					
Finish time:					

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

One time

6 months-9 months

6 weeks-3 months

9 months-1 year

3 months-6 months

Other time frames _____

REFERENCES

Please give three (3) personal references other than relatives, preferably ones who have known you for 5 years or longer.

Name	Address	Phone	Years Known
------	---------	-------	-------------

ADDITIONAL INFORMATION

Please circle the applicable response.

Do you currently use illegal drugs? Yes No

Have you ever been convicted of a misdemeanor or felony? Yes No

- Have you ever been convicted of or is there a pending criminal Charge against you for child abuse or neglect? Yes No
- Has your driver's license been suspended or revoked? Yes No

If you responded yes to any of the 4 questions, please explain the nature of the situation, occurrence, charge or conviction.

Although the work of the Club is of a sensitive nature and the Club is required to follow strict licensing standards, the Boys & Girls Clubs of the Midlands assesses each individual's application on a case by case basis and does not automatically disqualify candidates based on a criminal record.

Please explain any other facts or circumstances involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young people:

UNDERSTANDING AND AUTHORIZATION

I certify that all the answers on the application and any attachments are true and complete to the best of my knowledge. I also certify that I have not withheld any pertinent information. I understand that false statements on this application or any other material provided shall be considered sufficient cause for dismissal.

I agree that in the course of considering my application, you may inquire to verify information considering my background. I specifically authorize you to investigate all statements in this application. I authorize educational institutions, employers, personal references, the Omaha Police Department, Douglas County Sheriff Department, and the Nebraska Child Abuse/Neglect Central Registry to give you any and all information concerning my education, employment and fitness to work with children and young people to the Boys & Girls Clubs of Omaha, and release all such institutions and references listed above and any law enforcement agency from all liability and any damage that may result from furnishing this information to you. It is my understanding that such information will be used by Boys & Girls Clubs of Omaha solely for the purpose of making volunteer placement decisions. I agree to sign an additional, separate authorization form allowing a third party agency to conduct a thorough background check of me.

A photocopy of this authorization shall be considered as effective and valid as the original.

Signature: _____ Date: _____

If you have used a different last name please indicate former name: _____

Personal References checked: #1 _____ #2 _____ #3 _____

Police Record check sent: _____ Confirmed: _____

Nebraska Child Abuse/Neglect Central Registry sent: _____ Confirmed: _____

Volunteer Accepted/Denied and Notified: _____

Orientation Scheduled: Date and Time: _____

Placement beginning Date: _____

Position: _____

Supervisor: _____

Schedule: _____

Notes: _____
