



# Volunteer Application

Check the location where you are requesting to volunteer

- Ontiveros Youth Center (Youth & Junior)
- Davenport Club

- Ontiveros Youth Center (Teens)
- Davenport Teen Center

Name: \_\_\_\_\_  Male  Female

Address (PO Box if in college): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Number: (\_\_\_\_\_) \_\_\_\_\_ Email Address: \_\_\_\_\_

**Ethnicity** (check all that applies)

- White
- Hispanic
- Black/African American
- Asian
- American Indian or Alaskan Native
- Native Hawaiian or Other Pacific Islander
- Other: \_\_\_\_\_

Reason for volunteering: \_\_\_\_\_

**Which of these areas do you have personal interest or skills in that you would like to share with our members?**

- Homework help/tutoring or educational programs
- Arts programs (fine arts, dance, music, digital arts)
- Career development
- Sports and Recreation
- Service Learning
- Healthy Living and Life Skills
- Computers and Technology Programs
- Special Event (Fun Friday, Club Party, Guest Speaker)
- Other: \_\_\_\_\_

Hours Available: \_\_\_\_\_

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday

\* Please note that Club hours are typically 3:00pm – 6:00pm Mondays, Tuesdays, Thursdays, & Fridays. On Wednesdays from 2:00 pm- 6:00 pm

\* Summer programming hours vary depending on the club site.

Approved  Not Approved Reason: \_\_\_\_\_



Please provide at least 3 references.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_

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Phone Number: \_\_\_\_\_

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_

- I understand that I will need to provide a photo I.D. for identification purposes and I am also responsible for half the cost of the initial background check and fingerprinting in the amount of \$30 (non-refundable and the total cost to the organization is currently \$60) The cost of an annual background check is \$10. And I must pass a background and reference check before I can volunteer at BGCMV.
- I understand I will need to complete assigned on-line trainings in the first 7 days of my start date as a volunteer (if computer access is needed time will be given before program hours at designated site).
- I give my permission for my picture to be taken and to be used in any publicity materials.
- I understand that I will be given a volunteer handbook at the time of my orientation.

\_\_\_\_\_  
**Signature of Applicant**

\_\_\_\_\_  
**Date**

Approved     Not Approved    Reason: \_\_\_\_\_