



# Volunteer Application

Date: \_\_\_\_\_

<b>Office Use Only:</b> Start Date:	Position:	Orientation Date:
Age Verified By:	Verification Document:	Separation Date:
Sworn Disclosure: (signed _____ )	Criminal Record Check: (mailed _____ rec'd _____ )	CPS Clearance: (mailed _____ rec'd _____ )
Daily Hlth Ob: (exp. _____ )	FA: (exp. _____ )	CPR/AED: (exp. _____ )
MAT Cert: (exp. _____ )	Child Abuse/Neg Training ( _____ )	

Full Name:	Home Ph:	Cell:
Address	Zip Code:	DOB:
Soc. Sec. #:	Driver's Lic:	Email:
Are you legally eligible for employment in the U.S.?: ____ Yes    ____ No	Gender: ____ M    ____ F	Race:
Emergency Contact Name:	Phone:	Relationship:

Dear ReachFar Youth Development Center Volunteer Applicant:

Thank you for your application for volunteer service. We are dedicated to working with professionals who are energetic, motivated, and possess integrity. Please check any and all that apply to you below.

- Is a High School Graduate or has G.E.D
- Applicant must provide a copy of their driver's license or identification card and SS Card or birth certificate
- Applicant is able to effectively write and speak fluent English
- Applicant is at least 16 years or older
- By your own admission, of good character and reputation
- Applicant is capable of carrying out assigned responsibilities; accepting training and supervision
- Applicant is capable of communicating with emergency personnel
- Has United States Citizenship, or is legally authorized to work in the United States
- Is able to sit on the floor and in the children's chairs often
- Is physically able to get up and down from floor activities
- Will maintain a professional appearance and conduct
- Has the ability to meet all job requirements which might vary
- Is able to drive a motor vehicle
- All hired employees are subject to Random Drug Test
- Employees found under the influence of drugs or alcohol or with controlled substance within ReachFar Youth Development Center will be immediately dismissed
- Respect ReachFar Youth Development Center facility as drug free, smoke-free environments

**CRIMINAL OFFENSES**

( Yes / No ) Pled guilty, not contest or been convicted of any criminal offense.

( Yes / No ) Been the subject of an indictment, arrest or an official criminal complaint.

( Yes / No ) Has had a moving traffic violation that occurred within last five years or during employment or assignment as a driver.

If Yes, Please explain (use back for more space: \_\_\_\_\_)

**AVAILABILITY**

How many hours can you work per week? \_\_\_\_\_

On what date would you be able to begin? \_\_\_\_\_

**REFERENCES**

Name of Reference	Title/Employer	Phone Number	Relationship (Personal/Professional)

**Please list any experience, training, and restrictions**  
(Please list any relevant certificates such as CPR, etc.)

Monetary Waiver: I hereby waive all claims to monetary benefits for services rendered as a volunteer worker on a “without compensation basis” for an indefinite period. I understand that this waiver applies to all services rendered on behalf of the ReachFar Foundation. I hereby accept the volunteer appointment as outlined above.

Policy Agreement: If accepted as a volunteer with the ReachFar Foundation, I agree to adhere to the policies and procedures of the employee handbook and to respect the confidentiality of information pertaining to sensitive information.

\_\_\_\_\_  
**Volunteer Signature**

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

PARENT/GUARDIAN: The above named individual has my consent as parent/guardian to serve as a student volunteer with the ReachFar Foundation. I have read the above agreement as signed by my student and understand their obligation to the program if they are accepted as a volunteer. I also grant permission for my child to receive emergency medical treatment if injured while volunteering.

\_\_\_\_\_  
**Parent/Guardian Signature**

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