

VOLUNTEER APPLICATION



Kids Central, Inc. is an equal opportunity employer, dedicated to a policy of non-discrimination in employment on any basis, including race, color, age, religion, sex, national origin, handicap, disability, marital status or veteran status.

Name: _____

Date: _____

Position Description

JOB SUMMARY:

The volunteer may perform the following, but not limited to: clerical, administrative, customer service, mentoring Foster and/or Independent Living Youth, or other needs as required. The volunteer will be utilized on an as needed basis to perform functions/tasks as defined by the Kids Central area supervisor/manager requesting the need for volunteer services. The effort will be performed in coordination with the Volunteer Supervisor.

ESSENTIAL FUNCTIONS:

- As described in the function/task needs document developed by the area supervisor/manager
- Other duties as needed and assigned

Application

Are you 18 years or older?	Yes	No
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Present Address:

Street

City

County

State/Zip

Home Telephone No.: (____) _____

Email: _____

Referred by: _____

Driver's License No. and State: _____

Social Security Number: _____

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Provide experience or skills developed as an employee or volunteer:

Do you have any experience working with Children and Families? If so, please explain.

Have you ever been charged with a crime and either been placed on a court-ordered probation, had adjudication withheld, or entered a pre-trial intervention program? Yes No

If yes, please give details (date, place, offense(s), disposition):

Have you ever been convicted of a crime? Yes No

If yes, please give details (date, place, offense(s), disposition):

Have you ever pleaded guilty or no contest to a crime? Yes No

If yes, please give details (date, place, offense(s), disposition):

Have you ever worked for DCF and or a contract Provider Agency? Yes No

If Yes, please list agency name and date worked: _____

Please provide a brief description as to what you wish to do as a volunteer for Kids Central Inc.:

Please list days and/or hours you are available to volunteer:

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How many volunteer hours will you be willing to commit to each month?

IN CASE OF AN EMERGENCY CONTACT:

Name	Relationship	Phone Number
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Name	Relationship	Phone Number
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Name	Relationship	Phone Number
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VOLUNTEER APPLICATION CERTIFICATION

I hereby certify that all of the facts and information listed on this application are true and complete. I understand that any false, incomplete or misleading information given by me on this application is sufficient cause for rejection of this application. I also understand and agree that any such false, incomplete, or misleading information discovered on this application or provided in the selection process, which is discovered at any time after I am selected, may result in my dismissal. I hereby authorize Kids Central, Inc. to investigate all statements contained in this application and to interview the references listed in this application. I authorize the references listed to PROVIDE Kids Central, Inc. all facts, opinions and evaluations concerning my previous employment or volunteer efforts and any other information they may have, personal or otherwise, and release all such parties from any liability which may allegedly arise from furnishing such information to Kids Central, Inc., including, but not limited to, any liability for defamation or invasion of privacy.

If I am offered a volunteer position by Kids Central, Inc., I understand that such an offer will be conditioned upon satisfactory results of a background investigation, including a possible drug screen test. I further understand that my volunteer position can be terminated, with or without cause or notice, at any time.

I further understand and voluntarily agree as a condition of volunteering that I may be requested by Kids Central, Inc., to submit to a urinalysis or other drug screen test and that my failure to take such test(s) when requested to do so or unsatisfactory test results will disqualify me from consideration for volunteering.

I certify that I have read, understand and agree with the above.

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Signature of Applicant

Date

VOLUNTEER ACKNOWLEDGEMENT

I freely volunteer to participate in volunteer activities on behalf of Kids Central, Inc. As a non-employee of Kids Central, Inc., I understand that I do not receive, nor do I have expectations of receiving, compensation or benefits for the volunteer services I provide. I further understand that my voluntary participation in these volunteer activities can be discontinued at any time by Kids Central, Inc. or myself.

Signature of Applicant

Date