



## Volunteer Application

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Preferred time to call: \_\_\_\_\_ Email: \_\_\_\_\_

Preferred method of communication: \_\_\_\_\_

Gender: \_\_\_\_\_ Ethnicity: \_\_\_\_\_

Volunteer Position Applied For \_\_\_\_\_

### Employment

Last grade completed: \_\_\_\_\_ School: \_\_\_\_\_

Current employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Employer's Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Work phone: \_\_\_\_\_

Does your company/organization have a newsletter? \_\_\_\_\_

### Availability

Date available to start: \_\_\_\_\_ End date: \_\_\_\_\_

Please write in times you are available to volunteer:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Do you have any concerns about timing? \_\_\_\_\_

Do you have a geographic preference as to where you would like to volunteer? \_\_\_\_\_

How did you hear about Boys & Girls Clubs of Schenectady (BGCS)?

\_\_\_\_\_ Media/Advertisement \_\_\_\_\_ Volunteermatch.org \_\_\_\_\_ Referred by Friend/Volunteer  
\_\_\_\_\_ Website \_\_\_\_\_ From Club member \_\_\_\_\_ Other \_\_\_\_\_

Why do you want to volunteer with BGCS? \_\_\_\_\_

List any organizations you are affiliated with: \_\_\_\_\_

Please provide contact information for three people (not relatives) having knowledge of your character, experience and ability. We may not contact all of your references.

1) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Preferred method of communication: \_\_\_\_\_

2) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Preferred method of communication: \_\_\_\_\_

3) Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Preferred method of communication: \_\_\_\_\_

Have you ever been convicted of a crime? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain:

\_\_\_\_\_

Is there any additional information that you feel will be helpful in our selection process, please use this space:

\_\_\_\_\_

Please carefully read and initial the following before signing.

\_\_\_\_\_ I agree to let BGCS confirm all information listed.

\_\_\_\_\_ I agree to perform assigned duties, participate in trainings, and scheduled activities.

\_\_\_\_\_ I allow BGCS to use my experience and photograph for promotional activities.

By signing below, I attest to the truthfulness of all information provided on this application.

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

Thank you for applying to volunteer with the Boys & Girls Clubs of Schenectady!

Please return this application to:  
Volunteer Services  
Boys & Girls Clubs of Schenectady  
P.O. Box 466 Schenectady, NY 12301  
Phone Number: 518-374-4714

FOR OFFICE USE ONLY

Background Check Approved on Date \_\_\_\_\_ By \_\_\_\_\_

Volunteer Site: \_\_\_\_\_ Site Supervisor: \_\_\_\_\_

Volunteer Assignment: \_\_\_\_\_ Volunteer Time Commitment: \_\_\_\_\_