



**Volunteer Application**

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

I am volunteering as (check one below)

- An Individual
- A student, for school purposes
- A member of an organization/company

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

Home Address: \_\_\_\_\_ Apt. # \_\_\_\_\_

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

Home Telephone: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Email: \_\_\_\_\_

I prefer to be contacted via:    \_\_\_ Phone            \_\_\_ E-mail

Organization/Company Name: \_\_\_\_\_

Organization/Company Contact: \_\_\_\_\_

(If student) Name of school: \_\_\_\_\_ Year (grade): \_\_\_\_\_

Employer: \_\_\_\_\_ Job title: \_\_\_\_\_

How did you hear about Boys & Girls Club of New Rochelle?  
\_\_\_\_\_

**Interests and Special Skills** (check all the apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Education              | <input type="checkbox"/> Mentoring   |
| <input type="checkbox"/> Health & Self Esteem   | <input type="checkbox"/> Club Facility maintenance (painting, landscaping)           |
| <input type="checkbox"/> Sports                 | <input type="checkbox"/> Special skills (web design, photography, finance, etc.)     |
| <input type="checkbox"/> Art & Culture          | Specify: _____   |
| <input type="checkbox"/> Leadership Development | <input type="checkbox"/> Other _____   |
|   | <input type="checkbox"/> Are you Bilingual? __ Yes __ No, What language(s)?<br>_____ |

List below education, training, license or certifications that would be relevant to the position you are volunteering for: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date available to start: \_\_\_\_\_ Day(s) Available: Mon. Tues. Wed. Thurs. Fri. Sat. Sun.

Time of day: \_\_\_\_\_ (If applicable) Total amount of hours needed: \_\_\_\_\_

If seeking a seasonal or temporary position, what is the end date of your availability? \_\_\_\_\_

Do you have a location preference? \_\_\_ Yes \_\_\_ No    if yes, specify: \_\_\_\_\_

Do you have a valid driver's license? \_\_\_ Yes \_\_\_ No    Access to an automobile? \_\_\_ Yes \_\_\_ No



**BOYS & GIRLS CLUB  
OF NEW ROCHELLE**

Boys & Girls Clubs of New Rochelle (BGCNR) requires a background check for individual volunteers, or anyone who comes in direct contact with club members, for more than 10 hours and whom is over the age of 16 years old. The information requested below must be complete to determine eligibility and may require at least five business days to process.

Date of Birth: \_\_\_\_\_ SS#: \_\_\_\_\_

\*Signature of exemption by supervisor \_\_\_\_\_

**[For demographic tracking purpose only; BGCNR does not discriminate on the basis of sex, race, color, religion, citizenship, age, disability or national origin:]**

Gender \_\_\_\_\_

Race: \_\_\_\_\_

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

If yes, please list the date and place of the offense, the charge, circumstances and the disposition. The existence of a criminal record does not constitute an automatic bar to placement.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever had a substantiated charge of abuse or neglect? \_\_\_ Yes \_\_\_ No

If yes, please list the date and place of the offence, the charge, circumstances and the disposition.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the answers given by me in this application are correct and without consequential omissions of any kind. I understand and agree that a false statement or omission constitutes sufficient cause for the withdrawal of any offer or my dismissal from any position resulting from this application.

I authorize Boys & Girls club of New Rochelle (BGCNR) at any time to conduct one or more investigations of my background, references, past employment, education, criminal history and financial status, as well as other information verifying or disputing the accuracy of information I have provided to BGCNR in connections with this application.

Further, I agree and understand that my position can be terminated with or without cause and with or without notice at any time at either the option of BGCNR or myself. If accepted as a volunteer for BGCNR, I agree to abide by all policies and procedures applicable to BGCNR volunteers. I will uphold all BGCNR and individual Club House policies, as well as regulations presented to me by the club house director and stated in the "Nonprofit Volunteer Safety Manual BGCNR".

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

Date \_\_\_\_\_

**If Applicant is under the age of 18:**

**I represent and warrant that I am the parent or guardian of the above minor and have full legal authority to execute this Application, and I hereby agree that the above minor and I will be bound by all of the terms of this Application.**

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_

**Please return to:**

Betzally Espichan, Director of Education  
Boys & Girls Club of New Rochelle  
79 Seventh Street, New Rochelle, NY, 10801  
Email: [bespichan@bgcny.org](mailto:bespichan@bgcny.org)  
Application can also be found online at [www.bgcny.org](http://www.bgcny.org)