



BOYS & GIRLS CLUB
OF NEW ROCHELLE

VOLUNTEER APPLICATION

Date: _____

I am volunteering as (check one):

_____ An individual

_____ A student (for school/assignment purposes)

_____ A member of an organization/company

Full name: _____

Home street address: _____

City: _____ State: _____ Zip Code: _____

Preferred telephone number: _____

Email address: _____

I prefer to be contacted via: _____ Phone _____ Email

Individuals:

Name of employer: _____

Job title: _____

Students:

Name of school: _____

Grade/Year: _____

Organization members/volunteers:

Organization/company name: _____

Organization/company contact (include phone/email): _____

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

Interests/special skills:

_____ Education

_____ Mentoring

_____ Health/wellness

_____ Facility maintenance (painting, landscaping)

_____ Sports

_____ Marketing/administration (web design, photography, finance, etc.)

_____ Art/culture

_____ Leadership

_____ Fundraising/development

_____ Event management

Are you bilingual? _____ Yes _____ No

if so, what language(s) do you speak? _____

Please list education, training, and/or licenses/certifications that would be relevant to the position for which you are volunteering:

When are you able to begin your assignment (month/day)? _____

Please indicate day(s) you are available (circle all that apply): M Tu W Th F Sa Su

What time of day are you available? _____ Morning _____ Afternoon _____ Evening

If seeking a seasonal/temporary role, when will your availability end (month/day)? _____

Do you have a location preference? _____ Yes _____ No

If yes, please specify*: _____

(*Check bgcncr.org for our locations)

Do you have a valid driver's license? _____ Yes _____ No

Do you have access to an automobile? _____ Yes _____ No

Boys & Girls Club of New Rochelle requires a background check for all volunteers and other individuals who come in direct contact with club members for more than 10 hours, and who are over the age of 16. The information requested below must be provided to determine eligibility to work at one of our locations and may require at least five business days to process:

Date of birth: _____ SS#: _____

** Exemption approval (if applicable):

Supervisor name: _____

Signature: _____

BGCNR does not discriminate based on sex, race, color, religion, citizenship, age, disability, or national origin. The following information is requested for demographic purposes only.

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 offense, 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/guardian: _____ Date: _____

Please return completed form to:

Boys & Girls Club of New Rochelle
Volunteer Program
79 Seventh Street
New Rochelle, NY 10801
info@bgcncr.org