



Volunteer Application

AFC's Position On The Nationwide Problem Of Child Abuse

We make an active effort to prevent child abuse, which may include but is not limited to the following:
A background check, and references from past employers and volunteer organizations.

When practical, volunteers should not put themselves in a position in which they are alone with a single child and cannot be observed by others. Allegations or suspicions of child abuse are taken seriously and are reported to police and/or state agencies for investigation.

AFC's goals for children are:

1. To help children develop to their fullest potential.
2. To deliver programs in a positive environment of safety, support and care.
3. To support and strengthen the family unit.

Affirmation

I hereby affirm that my answers to questions on the application are true and correct, and that I have not knowingly withheld any fact or circumstances that would, if disclosed, affect my application unfavorably. I understand that any false information submitted in this application is cause for denial of this application or termination of my volunteer services regardless of when or how discovered. I hereby waive any right to claim that any request or investigation is an invasion of my privacy, since they are made with my consent and it is in my best interest while being considered for a volunteer position. I hereby acknowledge that I have read and understand the above statements and that I voluntarily sign this affirmation.

Signature

Date

Contact Information

Name: _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____

Work Phone: _____



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E-mail Address: _____

Special Skills or Qualifications

Skills and qualifications can be acquired through employment, previous volunteer work, or other activities such as hobbies or sports. What skills or qualifications do you have as a volunteer?

Previous Volunteer Experience

Have you worked as a volunteer before? If so, with who and what did you do?

When are you willing to volunteer? (days, times, dates)

Emergency Contact Information

Name and phone number of person to be notified in case of accident or emergency.

Name: _____

Phone: _____

E-mail Address: _____



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Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

To Be Completed By All Applicants

Have you ever been convicted of any criminal offense other than the following:

Minor traffic violation fine \$500.00 or less; **or** offenses settled in juvenile court or under welfare youth offender law.

Yes [] No [] If yes, please explain:

References (Exclude Relatives)

1. _____
Name Occupation Phone

2. _____
Name Occupation Phone

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Signature: _____ Date: _____