



VOLUNTEER APPLICATION

Date: _____

Name: _____ DOB: _____

Address: _____

Phone (Home): _____ (Cell): _____ (Work): _____

Email: _____ Gender: _____

Emergency Contact: _____ Relationship: _____ Phone: _____

How did you learn about our volunteer opportunities? _____

Do you have any experience working with children or volunteering? _____

If yes, when and where? _____

Do you have access to reliable transportation? _____

Current Employer: _____

Address: _____ Phone: _____

What is your occupation? _____

References: (Please list two character references.)

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

Volunteer Program Area Desired:

Tutoring / Homework Help

Arts & Crafts

Fundraising

Program Volunteer

Recreation / Athletics

Technology

Mentor

Special Events

Buildings & Grounds

Other skills, interests, talents: _____

Availability (days, time, frequency)? _____

Do you have any physical limitations or under treatment which might limit your ability to perform certain types of work? Explain: _____



VOLUNTEER / EMPLOYEE BACKGROUND CHECK

PLEASE ATTACH A COPY OF YOUR DRIVER'S LICENSE AND SOCIAL SECURITY CARD.

Types of checks that will be performed:

- National Criminal Report
- National Public Sex Offender Website Report

Driver's license #: _____ **State:** _____

Name (please print): _____
(Last) (First) (Middle)

Maiden /Alias Names: _____ **Social Security** _____ - _____ - _____

Daytime Phone: _____ **Evening Phone:** _____

***Date of Birth:** _____ / _____ / _____ ***Gender:** _____ ***Ethnicity:** _____

**Note: The above information is required for identification purposes only, and is in no manner used as qualifications for volunteering.*

Current Address: _____ **Apt #** _____

City: _____ **State:** _____ **Zip:** _____

Previous Address: _____ **Apt #** _____

City: _____ **State:** _____ **Zip:** _____

Have you ever been convicted of or plead 'guilty' or 'no contest' to a felony or misdemeanor as an adult or juvenile? Include deferred or probated adjudications as well as convictions that have been set aside. Yes No

If yes, give details including date, location and nature of the offense and disposition for each such incident.

Are you currently charged with (indictment or official criminal complaints by county or district court) a felony or misdemeanor? Yes No

If yes, give details, including date, location and type of charge.

Have you been or are you currently being investigated for allegedly abusing, neglecting, or exploiting a child, an elderly person, or a person with disabilities? Yes No

If yes, give details including the state and county in which each such investigation occurred.

Understanding and Authorization:

I hereby authorize Police Activities League of Massena, Inc., and/or the company of its choice to make an independent investigation of my background, references, character, past employment, education, criminal or police records, including those maintained by the State of New York Department of Public Safety, Department of Corrections, County Courts databases, Sexual Offender Registry, other public and private organizations and all public records for the purpose of confirming the information contained on my application and/or obtaining other information which may be material to my qualifications for volunteering or employment.

I release Police Activities League of Massena, Inc. and/or the company of its choice and any person or entity which provides pursuant to this authorization, from any and all liabilities, claims or lawsuits in regard to the information obtained from any and all of the above referenced sources.

I understand that any offer of volunteering is contingent on a satisfactory background investigation. I also understand that this form will be kept in my permanent file if I volunteer. I certify that the following is my true and complete legal name and all information contained herein is true and correct to the best of my knowledge.

Signature: _____

Date: _____