



Boys & Girls Club of West Springfield

VOLUNTEER APPLICATION

Please Print

First Name: _____ Last Name: _____

Address: _____ City, State, Zip: _____

Phone: () _____ Social Security Number: _____

Date of Birth: _____ Spouse Name: _____

PERSONAL INFORMATION

Gender: Male [] Female []

Physical Limitations: No [] Yes [] If yes, explain:

Education (circle highest level completed)

Grades: 1-5 6-9 11-12 College Business Graduate School Technical/Vocational

Former Work Occupation: _____ Most recent employer: _____

List previous volunteer experience:

Skills (List your skills and indicate proficiency level) Skilled Can Teach Amateur

1. _____
2. _____
3. _____

Languages: **Fluent** **Read** **Write**

1. _____
2. _____

Volunteer Availability: **(Circle all applicable)**

Number of Days per week: 1 2 3 4 5

Monday Tuesday Wednesday Thursday Friday

Transportation: (How will you get to your assignment?)

Public Transportation Walk Bus/Van Taxi/Car Service Car

Any special health concerns we should be aware of:

EMERGENCY CONTACT

First Name: _____ Last Name: _____

Address: _____ City, State, Zip: _____

Phone: () _____ Relationship: _____

List three references **that are not family members**. No more than one of the three references can be a friend.

Name: _____ Phone: () _____ - _____

Address: _____ Relationship: _____

Name: _____ Phone: () _____ - _____

Address: _____ Relationship: _____

Name: _____ Phone: () _____ - _____

Address: _____ Relationship: _____

AGREEMENT

I hereby agree, as a volunteer, to attend a Boys & Girls Club orientation and mandated trainings prior to the start date of volunteering. I understand that I must fill out and sign the volunteer application completely and be subject to a CORI & SORI background record check and that the results of this report may or may not qualify a volunteer from volunteering.

Applicant Signature

Date