



Volunteer Application

Name: _____ Birthdate: _____

Home Address: _____ City: _____ Zip: _____

Phone: Home: _____ Cell: _____ Work: _____

Preferred time to call: _____ Email: _____

Preferred method of communication: _____

Gender: _____ Ethnicity: _____

Volunteer Position Applied For _____

Employment

Last grade completed: _____ School: _____

Current employer: _____ Occupation: _____

Employer's Address: _____ City: _____ Zip: _____

Supervisor's Name: _____ Work phone: _____

Does your company/organization have a newsletter? _____

Availability

Date available to start: _____ End date: _____

Please write in times you are available to volunteer:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

Do you have any concerns about timing? _____

Do you have a geographic preference as to where you would like to volunteer?

How did you hear about Boys & Girls Clubs of Schenectady (BGCS)?

- Media/Advertisement
 Volunteermatch.org
 Referred by Friend/Volunteer
 Website
 From Club member
 Other _____

Why do you want to volunteer with BGCS? _____

List any organizations you are affiliated with: _____

Please provide contact information for three people (not relatives) having knowledge of your character, experience and ability. We may not contact all of your references.

1) Name: _____ Relationship: _____

Preferred method of communication: _____

2) Name: _____ Relationship: _____

Preferred method of communication: _____

3) Name: _____ Relationship: _____

Preferred method of communication: _____

Have you ever been convicted of a crime? Yes _____ No _____ If yes, please explain:

Is there any additional information that you feel will be helpful in our selection process, please use this space:

Please carefully read and initial the following before signing.

_____ I agree to let BGCS confirm all information listed.

_____ I agree to perform assigned duties, participate in trainings, and scheduled activities.

_____ I allow BGCS to use my experience and photograph for promotional activities.

By signing below, I attest to the truthfulness of all information provided on this application.

Signature: _____ Date: _____

Thank you for applying to volunteer with
the Boys & Girls Clubs of Schenectady!

Please return this application to:
Volunteer Services
Boys & Girls Clubs of Schenectady
P.O. Box 466 Schenectady, NY 12301
Located at 104 Education Drive, Schenectady, NY 12303
Phone Number: 518-374-4714

FOR OFFICE USE ONLY

Volunteer Site: _____ Site Supervisor: _____

Volunteer Assignment: _____ Volunteer Time Commitment: _____