

**Volunteer Application**

Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

Daytime Phone ( ) \_\_\_\_\_ Evening Phone ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

Emergency Contact and phone number(s) \_\_\_\_\_

How long have you lived in this community? \_\_\_\_\_ years \_\_\_\_\_ months

*If you have lived at your current address less than one year, please give your previous address:*

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Present Employer \_\_\_\_\_ Type of Work/Title \_\_\_\_\_

Dates of Present Employment From \_\_\_\_\_ To \_\_\_\_\_ Phone ( ) \_\_\_\_\_

Previous Employer \_\_\_\_\_ Type of Work/Title \_\_\_\_\_

Dates of Previous Employment From \_\_\_\_\_ To \_\_\_\_\_ Phone ( ) \_\_\_\_\_

High School \_\_\_\_\_ Dates \_\_\_\_\_ Level Completed \_\_\_\_\_

College \_\_\_\_\_ Dates \_\_\_\_\_ Level Completed \_\_\_\_\_

Technical School \_\_\_\_\_ Dates \_\_\_\_\_ Level Completed \_\_\_\_\_

Other Training \_\_\_\_\_ Dates \_\_\_\_\_

Have you ever been a volunteer or staff member at this organization? \_\_\_\_\_

If yes, which division? \_\_\_\_\_

In what position? \_\_\_\_\_ When? \_\_\_\_\_

Name of person who supervised you \_\_\_\_\_

Why do you want to volunteer? \_\_\_\_\_

Are there any special needs we should know about to help you carry out your volunteer position? \_\_\_\_\_

Hobbies, skills, and interests you are able to share: \_\_\_\_\_

Experience you have had working with children: \_\_\_\_\_

Please list the areas that most interest you:

Volunteer Experience or Organizational Membership:

Name of Organization and Location

Length of Time Affiliated with Organization

1) \_\_\_\_\_

2) \_\_\_\_\_

**Please circle:**

Have you ever been convicted of a criminal offense?	No	Yes
Have you ever been convicted of a crime involving bounced checks or stolen money?	No	Yes
Have you ever been convicted for use or sale of illegal drugs?	No	Yes
Do you presently hold a valid Georgia Driver's License?	No	Yes
Have you ever been convicted of child neglect or abuse?	No	Yes
Has your driver's license ever been suspended or revoked?	No	Yes

**List three persons not related to you who can verify your qualifications for this position. If you have previous experience as a volunteer, give one from that organization.**

1) Name \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
 Address \_\_\_\_\_ City, ST \_\_\_\_\_ ZIP \_\_\_\_\_  
 Telephone H ( ) \_\_\_\_\_ W ( ) \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

2) Name \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
 Address \_\_\_\_\_ City, ST \_\_\_\_\_ ZIP \_\_\_\_\_  
 Telephone H ( ) \_\_\_\_\_ W ( ) \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

3) Name \_\_\_\_\_ E-Mail Address \_\_\_\_\_  
 Address \_\_\_\_\_ City, ST \_\_\_\_\_ ZIP \_\_\_\_\_  
 Telephone H ( ) \_\_\_\_\_ W ( ) \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

**Please Initial to Indicate Authorization**

\_\_\_\_\_ I hereby authorize the above references to release any information relative to me that may be necessary to determine my qualification for a volunteer position with the Organization.

\_\_\_\_\_ I authorize and understand that the Organization may conduct an investigative check into my background, which may include review of sex offender registries, child abuse records, credit records, criminal history, and other investigative checks. I understand that, if appointed, my position is conditional upon the Organization receiving no inappropriate information about my background. I hereby release and agree to hold harmless from liability any entity or person or organization that may provide such information, including the Organization and its employees.

\_\_\_\_\_ I certify that I have received a copy of a summary of my rights under the *Fair Credit Reporting Act (FCRA)*.

\_\_\_\_\_ I certify that all the information provided in this application is true and complete. I understand that falsification or omissions of any information may be cause for denial of appointment or dismissal if discovered at a later date.

\_\_\_\_\_ I understand that, regardless of previous volunteering/appointment, the Organization is not obligated to appoint me to a volunteer position.

\_\_\_\_\_ I understand that prior to the expiration of my term, if appointed, I am subject to suspension and removal by the Organization at any time.

\_\_\_\_\_ I am acquainted with and subscribe to the principles of \_\_\_\_\_.

\_\_\_\_\_ I understand that training is required for any position, and I will participate in this training as it is offered.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**EEO Statement:** *It is the policy of the Organization that all persons shall have equal opportunity and access to its programs and facilities without regard to race, color, sex, religion, national origin, age, marital status, parental status, sexual orientation, or disability.*

**To Be Completed By the Organization**

Interviewed by \_\_\_\_\_ Date \_\_\_\_\_  
 Division \_\_\_\_\_ Supervisor \_\_\_\_\_  
 Appointed Position \_\_\_\_\_ Date \_\_\_\_\_

## **A Summary of Your Rights Under the Fair Credit Reporting Act**

The federal Fair Credit Reporting Act (FCRA) is designed to promote accuracy, fairness, and privacy of information in the files of every “consumer reporting agency” (CRA). Most CRAs are credit bureaus that gather and sell information about you – such as if you pay your bills on time or have filed bankruptcy – to creditors, employers, landlords, and other businesses. You can find the complete text of the FCRA, 15 U.S.C. §§1681-1681u. The FCRA gives you specific rights, as outlined below. You may have additional rights under state law. You may contact a state or local consumer protection agency or a state attorney general to learn those rights.

### **You must be told if information in your file has been used against you.**

Anyone who uses information from a CRA to take action against you – such as denying an application for credit, insurance, or employment – must tell you, and give you the name, address, and phone number of the CRA that provided the consumer report.

### **You can find out what is in your file.**

At your request, a CRA must give you the information in your file, and a list of everyone who has requested it recently. There is no charge for the report if a person has taken action against you because of information supplied by the CRA, if you request the report within 60 days of receiving notice of the action. You also are entitled to one free report every twelve months upon request if you certify that (1) you are unemployed and plan to seek employment within 60 days, (2) you are on welfare, or (3) your report is inaccurate due to fraud. Otherwise, a CRA may charge you up to eight dollars.

### **You can dispute inaccurate information with the CRA.**

If you tell a CRA that your file contains inaccurate information, the CRA must investigate the items (usually within 30 days) by presenting to its information source all relevant evidence you submit, unless your dispute is frivolous. The source must review your evidence and report its findings to the CRA. (the source also must advise national CRAs – to which it has provided the data – of any error.) The CRA must give you a written report of the investigation, and a copy of your report if the investigation results in any change. If the CRA’s investigation does not resolve the dispute, you may add a brief statement to your file. The CRA must normally include a summary of your statement in future reports. If an item is deleted or a dispute statement is filed, you may ask that anyone who has recently received your report be notified of the change.

### **Inaccurate information must be corrected or deleted.**

A CRA must remove or correct inaccurate or unverified information from its files, usually within 30 days after your dispute it. However, the CRA is not required to remove accurate data from your file unless it is outdated (as described below) or cannot be verified. If your dispute results in any change to your report, the CRA cannot reinsert into your file a disputed item unless the information source verifies its accuracy and completeness. In addition, the CRA must give you a written notice telling you it has reinserted the item. The notice must include the name, address and phone number of the information source.

### **You can dispute inaccurate items with the source of the information.**

If you tell anyone – such as a creditor who reports to a CRA – that you dispute an item, they may not then report the information to a CRA without including a notice of your dispute. In addition, once you’ve notified the source of the error in writing, it may not continue to report the information if it is, in fact, an error.

### **Outdated information may not be reported.**

In most cases, a CRA may not report negative information that is more than seven years old; ten years for bankruptcies.

### **Access to your file is limited.**

A CRA may provide information about you only to people with a need recognized by the FCRA – usually to consider an application with a creditor, insurer, employer, landlord, or other business.

### **Your consent is required for reports that are provided to employers, or reports that contain medical information.**

A CRA may not give out information about you to your employer, or prospective employer, without your written consent. A CRA may not report medical information about you to creditors, insurers, or employers without your permission.

### **You may choose to exclude your name from CRA lists for unsolicited credit and insurance offers.**

Creditors and insurers may use the file information as the basis for sending you unsolicited offers of credit or insurance. Such offers must include a toll-free phone number for you to call if you want your name and address removed from future lists. If you call, you must be kept off the lists for two years. If you request, complete, and return the CRA form provided for this purpose, you must be taken off the lists indefinitely.

### **You may seek damages from violators.**

If a CRA, a user or (in some cases) a provider of CRA data, violates the FCRA, you may sue them in state or federal court.

## Volunteer Application

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Application Date \_\_\_\_\_

Volunteer Position Sought \_\_\_\_\_

Name \_\_\_\_\_

Home Address \_\_\_\_\_

Work Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

### Education

Highest Level of Education \_\_\_\_\_

### Employment

Current Employer, if applicable \_\_\_\_\_

Position/Title \_\_\_\_\_

Dates of Employment (starting, ending) \_\_\_\_\_

Company/Employer \_\_\_\_\_

Address \_\_\_\_\_

Would you like us to keep your employer abreast of your volunteer service and achievement?     Yes  No

Special training, skills, hobbies \_\_\_\_\_

Groups, clubs, organizational memberships \_\_\_\_\_

Please describe your prior volunteer experience (include organization names and dates of service) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What experiences have you had that may prepare you to work as a volunteer in the field of [description of field, e.g. domestic violence, child abuse prevention, youth recreation, etc.]? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Why do you want to volunteer? [or What do you want to gain from this volunteer experience?]

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime? [If yes, please explain the nature of the crime and the date of the conviction and disposition.] Conviction of a crime is not an automatic disqualification for volunteer work.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have: a driver's license?  Yes  No

Car insurance?  Yes  No

Car available for transporting others?  Yes  No

REFERENCES: Please list three people who know you well and can attest to your character, skills and dependability. Include your current or last employer.

Name/Organization	Relationship to You	Phone	Length of relationship
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1.

2.

3.

**Please read the following carefully before signing this application:**

I understand that this is an application for and not a commitment or promise of volunteer opportunity.

I certify that I have and will provide information throughout the selection process,

including on this application for a volunteer position and in interviews with [Name of Nonprofit] that is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that information contained on my application will be verified by [Name of Nonprofit]. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with [Name of Nonprofit] or my termination as a volunteer.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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This document is from the Nonprofit Risk Management Center's *Accident Preparation and Response Tutorial* ([www.nonprofitrisk.org](http://www.nonprofitrisk.org)), which was made possible by financial support from the Public Entity Risk Institute.



## Disclaimer Language for a Volunteer Application\*

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*\*Please note that the disclaimer language featured below is not appropriate for all volunteer assignments. Low-risk volunteer positions should probably not be subject to the rigorous review and scrutiny contemplated in this disclaimer. Before using disclaimer language, give some thought to how it will be perceived by prospective volunteers and modify to meet the specific needs of your nonprofit.*

### Read Carefully Before Signing This Application

I hereby consent to permit [Name of Nonprofit] to contact anyone it deems appropriate to investigate or verify any information provided by me to discuss my suitability for a volunteer position, including my background, volunteer experience, education or related matters. I expressly give my consent to any discussions regarding the foregoing and I voluntarily and knowingly waive all rights to bring an action for defamation, invasion of privacy, or similar cause of action, against anyone providing such information.

I hereby authorize any organization affiliated with [Name of Nonprofit] to investigate my background as necessary for the consideration of my application for the position of \_\_\_\_\_.

I further authorize all persons, schools, companies, organizations, credit bureaus and law enforcement agencies to supply all information concerning my background and to furnish reports thereon. I hereby release them and any organization affiliated with [Name of Nonprofit] from any and all liability and responsibility arising from their doing so.

I certify that the answers given by me to all questions on this application and any attachments are, to the best of my knowledge and belief, true and correct and that I have not knowingly withheld any pertinent facts or circumstances. I understand that any omission or misrepresentation of fact in this application may result in refusal of or separation from volunteer service upon discovery thereof.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Nonprofit  
Risk Management  
Center**

...find the answer here

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