

GREAT FUTURES START HERE.



VOLUNTEER APPLICATION

We are committed to all federal, state, and local laws and regulations pertaining to equal opportunity. To this end, the Boys & Girls Clubs of St. Charles County does not discriminate against any individual with regard to race, color, religion, sex, age, national origin, disability, marital status, veteran status, or other protected status.

Name: _____ (middle initial or middle name required)
Address: _____ Phone: _____
City/State: _____ Zip: _____ Cell/Work Phone: _____
Email address: _____

Why are you interested in volunteering with the Boys & Girls Clubs of St. Charles County?

Are you interested in any particular position, program area, or age group? _____
What special interests, skills, or talents do you have to contribute to the Club?

Do you prefer on-going volunteer opportunities or one-time events/activities? _____

1. Have you ever been convicted of a felony?* _____ Yes _____ No
*If Yes, please explain:
2. Have you ever been convicted of any crime against children?* _____ Yes _____ No
*If Yes, please explain:
3. Are you willing to participate in a drug screening? _____ Yes _____ No
4. Do you have a valid driver's license? _____ Yes _____ No
Driver's License #: _____ State Issued: _____
Expiration date: _____
6. Are there any days of the week or times of the day that you are NOT available to volunteer?

Please list experience working with youth (position and responsibility):

1. _____
2. _____
3. _____

Education

Years Completed

Graduated?

High School: _____

1 2 3 4

Yes No

College: _____

1 2 3 4

Yes No

Other: _____

1 2 3 4

Yes No

Please list past employers:

1. Employer: _____ Phone: _____

Address: _____ City/State: _____ Zip: _____

Employed from: _____ to _____ May we contact? _____ Yes _____ No

Position / Responsibility: _____

2. Employer: _____ Phone: _____

Address: _____ City/State: _____ Zip: _____

Employed from: _____ to _____ May we contact? _____ Yes _____ No

Position / Responsibility: _____

Please list two personal references (not family) that we may contact regarding your application:

1. Name: _____ Relationship: _____

Address: _____ Phone: _____

2. Name: _____ Relationship: _____

Address: _____ Phone: _____

I do hereby attest that all information is truthful and accurate to the best of my knowledge. I authorize the Boys & Girls Clubs of St. Charles County to investigate all statements contained on this application should they desire, including State Police and FBI background checks.

Signature: _____ Date: _____



Background Check Permission

BGCSTC conducts background checks on all prospective and current volunteers and employees on an annual basis. We utilize the services of one of the largest screening providers in the world, First Advantage. This check will include but is not limited to the following:

- A National Criminal Search
- A Missouri State and/or local Criminal Record Search
- A Social Security Verification Search
- A State Sexual Offender Registry
- A Motor Vehicle Record Check
- Additional searches may be required

A National Sexual Offender Registry search will be conducted for each prospective and current volunteer and employee utilizing the Department of Justice National Sex Offender Public Registry.

All employees of the BGCSTC must be registered with the Missouri Family Care Safety Registry, which requires submitting to and passing the MFCR background check.

In accordance with Missouri law, any juvenile (under the age of 18) criminal history data may only be released to the individual, their parents or guardian. Therefore, permission from the individual's parent or guardian to release the information to the BGCSTC administrative office is required as indicated in the affirmation statement below.

DO NOT email this form to the Community Impact Coordinator as it contains sensitive information. Once completed, please submit form in person.

Permission to Conduct Background Check & Affirmation Statement

By signing below, I authorize the Boys & Girls Clubs of St. Charles County to conduct background checks on me through the agencies mentioned above and authorize the release of all information provided by law enforcement agencies related to any potential past criminal activity on my part to the Boys & Girls Clubs of St. Charles County. I understand that this information will be considered in the hiring process but will not be a sole determinant of employment or volunteering.

Any juvenile (under the age of 18) requires the consent of a parent/guardian to release their criminal history data to the administrative office of the Boys & Girls Clubs of St. Charles County.

I further state that I am currently drug free and have no record of crimes against children.

Printed LAST Name **MIDDLE(required)** FIRST Social Security Number

Address City State Zip

Driver's License Number Driver's License Expiration

Signature Date Date of Birth

Email (required)

Phone number (required)



**BOYS & GIRLS CLUBS
OF ST. CHARLES COUNTY**

FOR STAFF/VOLUNTEERS

**Warnings Relating to Coronavirus/COVID-19 for
Onsite Work or Volunteer Service**

The novel coronavirus, COVID-19, has been declared a worldwide pandemic by the World Health Organization. **COVID-19 is extremely contagious** and has significant person-to-person spread. As a result, federal, state, and local governments and federal and state health agencies have recommended social distancing measures and have, in many locations, required ongoing prohibitions on the congregation of groups of people of various sizes.

While COVID-19 can cause mild symptoms in some individuals, it can lead to severe illness and even death in others. **Adults over age 65** and **people of any age with serious underlying medical conditions** including, but not limited to, **HIV, asthma and other respiratory conditions**, and **pregnancy**, may be a **higher risk for more serious complications from COVID-19**.

Boys & Girls Clubs of St. Charles County (BGCSTC/Club) has made the decision to reopen now that community transmission rates have declined and has put in place preventative measures to reduce the spread of COVID-19, guided by the CDC and local health agencies. These include, but are not limited to, [social distancing, providing staff with masks, wellness monitoring, increased sterilization, required hand-washing, limiting group size, etc. to reduce the spread of COVID-19; however, the Club **cannot guarantee** that you will not become infected with COVID-19. Further, working onsite at the Club **could increase** your risk of contracting COVID-19.



By signing this agreement, I acknowledge the contagious nature of COVID-19 and voluntarily assume the risk that I may be exposed to or infected by COVID-19 by working or volunteering onsite at the Club and that such exposure or infection may result in personal injury, illness, permanent disability, and death. I understand that the risk of becoming exposed to or infected by COVID-19 at the Club may result from the actions, omissions, or negligence of myself and others, including, but not limited to, Club employees, volunteers, and program participants and their families.

My decision to continue working onsite at the Club is exclusively my own, and made in full understanding and acceptance of the foregoing risks. My employer, Boys & Girls Clubs of St. Charles County has shared with me and I understand leave options.

Printed name of Employee

Signature of Employee

Date

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ACKNOWLEDGEMENT

I acknowledge receipt of Boys & Girls Clubs of St. Charles County Volunteer Handbook.

I agree to read the handbook and to follow the guidelines and policies set forth in the handbook and any amendments to the handbook along with the other policies and procedures of the Club. I understand that any violation of the policies in this handbook could result in discipline, up to and including termination.

I am aware that the contents of the volunteer handbook are presented as a matter of information and that except for the at-will provisions, the handbook can be amended at any time. I realize that nothing in this handbook is intended to infringe upon my rights. Additionally, I am hereby made aware that under the Defend Trade Secrets Act I may not be held criminally or civilly liable under federal or state trade secret laws if I disclose a trade secret to a government official or attorney solely for the purpose of reporting or investigating a violation of law, or in a complaint or document filed in a lawsuit, if that filing is made under seal.

I understand and agree that the handbook is for informational purposes only and is not intended to create a contract, nor is it a contract of volunteering or continuing volunteering between myself and the Club. I also understand that neither the handbook nor any policy of the Club is a guarantee or promise of volunteering or continuing volunteering.

I understand that any questions related to the Volunteer Handbook should be addressed with the Community Impact Coordinator.

Volunteer Sign/Print Name Date

Supervisor Sign/Print Name Date