



**BOYS & GIRLS CLUB**  
OF OAK RIDGE

## Volunteer Application

The Boys and Girls Club of Oak Ridge is part of a nationwide and local effort “to enable all young people, especially those who need us most, to reach their full potential as productive, caring, and responsible citizens.”

### General Information

Full Name (first, middle, last): \_\_\_\_\_

Address: \_\_\_\_\_ Phone (home): (\_\_\_\_) \_\_\_\_\_  
Street and/or Apt. #

\_\_\_\_\_ (cell): (\_\_\_\_) \_\_\_\_\_  
City, State, Zip

Email Address: \_\_\_\_\_ Application Date: \_\_\_\_\_

Date Available: \_\_\_\_\_

Days/Times Available:

Days	Monday	Tuesday	Wednesday	Thursday	Friday
Times					

Referred by: \_\_\_\_\_

Do you have transportation (circle one): Y N

Please mark your commitment level:

\_\_\_ one-time event      \_\_\_ 1-3 months      \_\_\_ 3-6 months      \_\_\_ 6-12 months  
\_\_\_ as needed (on call)      \_\_\_ other (\_\_\_\_\_)

Have you ever been terminated from a volunteer position or suspended from an educational institution? (circle one): Y N If yes, please explain.

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

Have you been convicted of a crime in the past 10 years (circle one): Y N  
If yes, please explain: \_\_\_\_\_

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

## Volunteer Experience

Agency	Address	Phone Number
		(     )
Supervisor	May we contact?	How long (to/from)
Responsibilities: _____		

Agency	Address	Phone Number
		(     )
Supervisor	May we contact?	How long (to/from)
Responsibilities: _____		

Agency	Address	Phone Number
		(     )
Supervisor	May we contact?	How long (to/from)
Responsibilities: _____		

## Preferences

Which age group(s) do you prefer? Check all that apply:

\_\_\_ 5 -8 years old

\_\_\_ 9-10 years old

\_\_\_ 11-12 years old

\_\_\_ 13-15 years old

\_\_\_ 16-17 years old

\_\_\_ any age is good

Is there a particular type of volunteer work you prefer? Check all that apply:

\_\_\_ Working one-on-one with a single child

\_\_\_ Helping with office or general administrative duties

\_\_\_ Working directly with a Staff member as their assistant

\_\_\_ Working on fundraising/campaigns

\_\_\_ Working on group projects

\_\_\_ Facilitating trainings or workshops with children

\_\_\_ No preference – put me where you need me

What sort of activities/hobbies do you enjoy? \_\_\_\_\_

I would enjoy (check all that apply):

- Tutoring  
 Sports coach/assistant  
 Music leader/assistant  
 Other: \_\_\_\_\_  
 Arts & Crafts  
 Listening to a child read  
 Helping a child w/computer work  
 Assisting a child with homework  
 Playing board games  
 Leading a recreational activity  
 Leading a discussion/small group  
 Chaperoning a fieldtrip  
 Mentoring youth/teens
- Subject(s): \_\_\_\_\_  
Sport(s): \_\_\_\_\_  
Instrument(s): \_\_\_\_\_

Do you have any physical limitations which may limit your ability to perform certain activities?

If yes, please explain. \_\_\_\_\_  
\_\_\_\_\_

### References

Please list one Professional Reference and one Personal Reference we may contact to attest to your character, work ethic, dependability, etc. Please do not list any relatives.

Name	Contact #	Contact email	Years Known

I certify that all the answers given on this application and any attached documents submitted are true and I have not withheld or omitted any pertinent information. I also understand that I will be required to satisfactorily pass a background check as well as a drug screening to be considered as a volunteer.

I understand that any omissions, misrepresentations or false information submitted in connection with this application may result in refusal of or dismissal from volunteer activities.

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

### OFFICE USE ONLY

Ref #1 Contacted: \_\_\_\_\_ By: \_\_\_\_\_ Ref #2 Contacted: \_\_\_\_\_ By: \_\_\_\_\_  
Drug Screening: \_\_\_\_\_ PASS / FAIL. Background Check: \_\_\_\_\_ PASS / FAIL