



**GREAT FUTURES  
START HERE.**

# Volunteer Application

In order to become a volunteer you must:

- ° Be at least 16 years of age
- ° Complete a Volunteer Application
- ° Pass a required background check
- ° Attend a volunteer orientation

*We welcome individuals in the community who want to support our efforts through volunteering. If you are interested in inspiring and motivating our local youth, then Boys & Girls Clubs is the place for you! We are always looking to expand our volunteer family. We encourage individual volunteers to consider making a commitment of at least three months. We have found that both volunteers and club members benefit most from lasting, consistent relationships.*

*For more information about volunteering, call our Admin Office at 251-432-1235.*

**Please fill out the following information COMPLETELY (print clearly):**

**Name** \_\_\_\_\_ **\* Ethnicity** \_\_\_\_\_ **\* Gender** ☐ M / ☐ F  
First Middle Last

**\* Date of Birth** \_\_\_\_\_ **\* Age** \_\_\_\_\_ **Phone** \_\_\_\_\_ **Email** \_\_\_\_\_  
Month / Day / Year

**Current Home Address:** \_\_\_\_\_  
Street City State Zip Code

**T-Shirt size:** \_\_\_\_\_

**Are you a former member of a Boys & Girls Club?** ☐ Yes ☐ No

If yes, what was the name and location of the club? \_\_\_\_\_

## **Skills and Experience**

**Current Employer or School:** \_\_\_\_\_  
Employer / School Name Occupation

**\* Highest level of education completed** ☐ High School ☐ Some College ☐ College ☐ Trade School ☐ Other

\* Note: This information is required for identification purposes only.

BGCSA does not discriminate on the basis of sex, race, religion, age, handicap, disability, national origin, or any other characteristics protected by law.

**Are you volunteering for High School or College Credit?** Yes / No (circle one)

**Name of School:** \_\_\_\_\_

**Area of Study:** \_\_\_\_\_ **Total Hours Required:** \_\_\_\_\_

**Please list any past volunteer experiences with youth** \_\_\_\_\_

## **Volunteer Interests, Time Commitment, and Availability**

**What are your areas of interest?**

- |                                                                                                |                                         |                                                     |                                               |
|------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> As Needed/Assigned                                                    | <input type="checkbox"/> Mentoring      | <input type="checkbox"/> College/Career Prep.       | <input type="checkbox"/> Facility Maintenance |
| <input type="checkbox"/> Homework Help                                                         | <input type="checkbox"/> Special Events | <input type="checkbox"/> Computer Skills/Technology | <input type="checkbox"/> Admin/Clerical       |
| <input type="checkbox"/> Games Room                                                            | <input type="checkbox"/> Arts/Crafts    | <input type="checkbox"/> Low Organized Games        | <input type="checkbox"/> Reading to Members   |
| <input type="checkbox"/> Employment Skills Training                                            | <input type="checkbox"/> Theater/Dance  | <input type="checkbox"/> Cooking/Nutrition          | <input type="checkbox"/> Field Trip Chaperone |
| <input type="checkbox"/> Interests, hobbies, or other activities not listed _____              |                                         |                                                     |                                               |
| <input type="checkbox"/> Coaching – list sports that you are able to coach _____               |                                         |                                                     |                                               |
| <input type="checkbox"/> Tutoring – list subject areas that you are comfortable tutoring _____ |                                         |                                                     |                                               |

## Volunteer Interests, Time Commitment, and Availability

(continued...)

### What age group(s) do you feel comfortable working with?

- ☐ 6-9 years      ☐ 10-12 years      ☐ 13-15 years      ☐ 16-18 years      ☐ any age

### Do you have a location where you would prefer to volunteer?

☐ Cody Road Branch – 35 Cody Rd S, Mobile, AL 36608  
HOURS: school year 2:30 pm – 6:30 pm Monday – Friday  
summer 7:00 am – 6:00 pm Monday – Friday

☐ Gilliard Elementary Branch – 2757 Dauphin Island Pkwy, Mobile, AL 36605  
HOURS: school year 3:00 pm – 6:30 pm Monday – Friday  
summer 7:30 am – 5:00 pm Monday – Friday

☐ Kiwanis Branch – 712 Rice St, Mobile, AL 36607  
HOURS: school year 3:00 pm – 7:00 pm Monday – Friday  
summer 7:00 am – 6:00 pm Monday – Friday

☐ Semmes Branch – 3810 Wulff Rd E, Semmes, AL 36575  
HOURS: school year 2:30 pm – 6:30 pm Monday – Friday  
summer 7:00 am – 6:00 pm Monday – Friday

☐ Prichard/Whitley Branch – 528 Capt. Leon C Roberts St., Prichard, AL 36610  
HOURS: school year 2:30 pm – 6:30 pm Monday – Friday  
summer 7:00 am – 6:00 pm Monday – Friday

☐ Optimist Branch – 1517 Plaza Dr., Mobile, AL 36605  
HOURS: school year 3:00 pm – 7:00 pm Tuesday – Friday, 10:00 am – 3:00 pm Saturday  
summer 11:00 am – 6:00 pm Monday – Friday

☐ Sonny Callahan Branch - 6585 Carol Plantation Rd, Theodore, AL 36582  
HOURS: school year 2:30 pm – 6:30 pm Monday – Friday  
summer 7:00 am – 6:00 pm Monday – Friday

☐ Administrative Office – 1102 Government Street, Mobile, AL 36604  
HOURS: year-round 8:00 am – 5:00 pm Monday – Friday

### During which days and times are you available for volunteer assignments?

#### School Year

	Time Available
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	

#### Summer

	Time Available
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	

#### Emergency Contact #1 Information

Name Relationship Phone Number

#### Emergency Contact #2 Information

Name Relationship Phone Number

I verify that the information contained in this form, including my full legal name, is true, correct, and complete to the best of my knowledge.

I understand that I am not allowed to volunteer at the Boys & Girls Clubs of South Alabama prior to completing orientation and approval of background check. This application will be sent to the Human Resource Department; you will be contacted for needed information and approval.

Applicant's Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

#### ----- FOR ADMINISTRATIVE USE ONLY -----

Received by STAFF: \_\_\_\_\_  
date staff / club

Received by HR: \_\_\_\_\_  
date staff

Approved by HR: \_\_\_\_\_  
date staff

## **DISCLOSURE AND AUTHORIZATION FOR RELEASE OF INFORMATION**

As part of our hiring background and investigation, we may obtain consumer reports to prepare an investigative consumer report. These reports may be obtained at any time after the Boys and Girls Clubs of South Alabama Inc. receives authorization from you, including any time during the period of employment if hired. The investigative consumer report may consist of contacting all listed prior employers to verify your employment. It may also include, but not be limited to, credit information reports, criminal history reports and driving history records. Under the provisions of the Fair Credit Reporting Act (15 USC at 1681-1681u) as amended, before we can seek such reports, we must have your written permission to obtain the information. You have the right, upon written request, to a complete and accurate disclosure of the nature and scope of the investigation. You are also entitled to a copy of your Consumer Rights Under the Fair Credit Reporting Act.

Under the provisions of the Fair Credit Reporting Act, 15 USC, Section 1681 et seq., the Americans with Disabilities Act and all applicable federal, state and local laws, I hereby authorize and permit Boys and Girls Clubs of South Alabama, Inc. and subsidiaries to obtain a consumer report and/or investigative consumer report which may include the following:

1. My employment records;
2. Records concerning any driving, criminal history, credit history, civil record, worker's compensation (post-offer only) and drug testing;
3. Verification of my academic and/or professional credentials; and information and/or copies of documents from any military service records;

I understand that an "investigative consumer report" may include information as to my character, general reputation, personal characteristics, and mode of living which may be obtained by interviews with individuals with whom I am acquainted or who may have knowledge concerning any such items of information. I agree that a copy of this authorization has the same effect as an original.

I acknowledge that I have received and read *the Fair Credit Reporting Act Background Check Disclosure, A Summary of Your Rights Under the Fair Credit Reporting Act* and this authorization. I certify that I understand the documents I have received.

I hereby authorize Boys and Girls Clubs of South Alabama, Inc. or its authorized agents, for employment purposes; to obtain or prepare consumer reports and investigative consumer reports at any time after it receives this authorization, including any time that I may be employed by Boys and G8irls Clubs of South Alabama, Inc.

I hereby authorize law enforcement agencies, public and private schools, federal, state and local agencies and courts, credit bureaus, information bureaus, current and former employers, financial institutions, licensing agencies, governmental agencies, the military, and other individuals and entities to provide any and all information that is requested by a consumer reporting agency or Boys and Girls Clubs of South Alabama, Inc.

I certify that the information provided on this form is true and correct. I understand that any information that I provide in an employment application or that I otherwise disclose during my employment may be used to obtain consumer reports and investigative consumer reports.

I hereby release and hold harmless any person, firm or entity that discloses matters in accordance with this authorization, as well as Boys and Girls Clubs of South Alabama, Inc. and subsidiaries from liability that might otherwise result from the request for use of and/or disclosure of any or all of the foregoing information. I understand and acknowledge that under the provision of the Fair Credit Reporting Act, I may request a copy of any consumer report from the consumer reporting agency that compiled the report, after I have provided proper identification.

I hereby authorize Boys and Girls Clubs of South Alabama, Inc. and subsidiaries to obtain and prepare an investigative consumer report as set forth above as part of its investigation of my employment application and continued employment, as needed.

FULL NAME:

\_\_\_\_\_  
(Signature)

FULL NAME: (include middle)

\_\_\_\_\_  
(Printed Name)

DATE:

EMAIL ADDRESS

\_\_\_\_\_  
**(REQUIRED)**

CURRENT PHYSICAL  
ADDRESS \_\_\_\_\_  
(no P.O. Box):

CITY/STATE/ZIP: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_

DATE OF BIRTH\*: \_\_\_\_\_

PLACE OF BIRTH: (City AND State or Country) \_\_\_\_\_

SOCIAL SECURITY NO: *(Required to complete background screen)* \_\_\_\_\_

DRIVER'S LICENSE NUMBER: \_\_\_\_\_ EXPIRATION DATE: \_\_\_\_\_

STATE ISSUED: \_\_\_\_\_

WITNESS \_\_\_\_\_

DATE

**If applicant is under 18 years of age:**

Parent/Legal Guardian PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

\* The Age Discrimination in Employment Act of 1967 prohibits discrimination against persons of at least 40 years of age.

*Para informacion en espanol, visite [www.ftc.gov/credit](http://www.ftc.gov/credit) o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.*

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

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.ftc.gov/credit](http://www.ftc.gov/credit) or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment — or to take another adverse action against you — must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days. In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without

your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit).

- You may limit "prescreened" offers of credit and insurance you get based on information in your credit report. Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-5678688).
- You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- Identity theft victims and active duty military personnel have additional rights. For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit).

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word 'National' or initials 'N.A.' appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Consumer Help (FRCH) P O Box 1200 Minneapolis, MN 55480 Telephone: 888-851-1920 Website Address: <a href="http://www.federalreserveconsumerhelp.gov">www.federalreserveconsumerhelp.gov</a> Email Address: <a href="mailto:ConsumerHelp@FederalReserve.gov">ConsumerHelp@FederalReserve.gov</a>
Savings associations and federally chartered savings banks (word 'Federal' or initials 'F.S.B.' appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words 'Federal Credit Union' appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture

Office of Deputy Administrator - GIPSA  
Washington, DC 20250 202-720-7051

## How to Fill out The Child Abuse/Neglect Central Registry Clearance Request (DHR-FCS-1598)

**\*Do not leave any line/information blank\***

### In the middle section (the highlighted part) of the form

1. Please enter your name, sex, race, and date of birth.
2. On the second line, enter your mailing address (not your email).
3. On the next line, write any alias, maiden name, or prior married names you might have. **If you do not have any** of these, write your **current** last name.
4. Please list the name and date of birth of your spouse and/or any former spouses. Please include all information. If not applicable, write "N/A".
5. On the fifth line, fill in the name and date of birth of all children and any stepchildren. Write N/A if not applicable.
6. On the next line, write the name of all Alabama counties where you have lived and/or worked.

### In the section below

To be completed by person being cleared: Please sign and date the form. A witness must also sign and date, this verifies your signature.

Note\*The signatures on the DHR must be original, (not photocopied or electronic)\*

### Example of a completed DHR form:

PRINT OR TYPE in black or blue ink. Additional information regarding the CA/N Central Registry is on the back of this form. ** See instructions for the address to use when submitting this form. **	
Requesting Person or Agency/Organization	Boys and Girls Clubs of South Alabama, Inc.
Mailing Address	Post Office Box 6724 Mobile, AL 36660
Telephone Number (251)	432-1235
Email	cmiller@bgcsouthal.org
PRINT Requestor's Name	Carol Miller
Requestor Signature	Date
Witness Signature	Date
Check All That Apply	
<input type="checkbox"/> Child Placing Agency	
<input type="checkbox"/> Residential Child Care Facility	
<input type="checkbox"/> Child Day / Night Care Center	
<input type="checkbox"/> Family Day / Night Care Home	
<input type="checkbox"/> Exempt Child Day Care Center	
<input type="checkbox"/> Medicaid Rehab. Provider DHR Vendor	
<input checked="" type="checkbox"/> Other (Please Specify)	
Boys and Girls Clubs of South Alabama, Inc.	

The person whose name and identifying information, printed or typed below, will provide **unsupervised care and supervision of children** as an ☐ employee ☒ volunteer ☐ other. This person's specific job/role is or will be:

**EXAMPLE**

Name Last First Middle Sex ☒ Male ☐ Female Race Race DOB 00/00/0000

Current Mailing Address Your Address (NOT EMAIL)

Alias, Maiden & Prior Married Name(s) Current last name if you don't have a maiden/married name

Name & DOB of Spouse & Former Spouse(s) N/A (If yes, must include DOB)

Name & DOB of Children / Stepchildren N/A (If yes, must include DOB)

Alabama counties where person has lived and/or worked Places lived / worked in AL

Attach additional pages as needed to provide all information requested above.

**To be completed by person being cleared**

I authorize the Alabama Department of Human Resources to release information contained in the Child Abuse / Neglect Central Registry about me to the above named person/agency/organization. I hereby waive any right to any review or hearing to which I may otherwise be entitled. I further release the Department of Human Resources, its officers, and employees from any and all claims arising out of or in any way connected to the release or dissemination of any information concerning me.

☒ Original Signature 00/00/0000 Original Witness Signature 00/00/0000

Signature Date Signature of Witness Date



**ALABAMA DEPARTMENT OF HUMAN RESOURCES  
CHILD ABUSE / NEGLECT (CA/N) CENTRAL REGISTRY CLEARANCE**

**PRINT OR TYPE** in black or blue ink. Additional information regarding the CA/N Central Registry is on the back of this form.  
**\*\* See instructions for the address to use when submitting this form. \*\***

Requesting Person or Agency/Organization	Boys and Girls Clubs of South Alabama, Inc	<b>Check All That Apply</b>
Mailing Address	Post Office Box 6724	<input type="checkbox"/> Child Placing Agency
	Mobile, AL 36660	<input type="checkbox"/> Residential Child Care Facility
	klakeman@bgcsouthal.org -	<input type="checkbox"/> Child Day / Night Care Center
Telephone Number (251) 432-1235	Email: cmiller@bgcsouthal.org	<input type="checkbox"/> Family Day / Night Care Home
<b>PRINT</b> Requestor's Name	Carol Miller or Karen Lakeman	<input type="checkbox"/> Exempt Child Day Care Center
Requestor Signature	Date	<input type="checkbox"/> Medicaid Rehab. Provider DHR Vendor
Witness Signature	Date	<input checked="" type="checkbox"/> Other (Please Specify)
Boys and Girls Clubs of South Alabama, Inc		

The person whose name and identifying information, printed or typed below, will provide **unsupervised care and supervision of children** as an ☐ employee ☒ volunteer ☐ other. This person's specific job/role is or will be:

**USE BLUE INK!**

Work with children where needed \_\_\_\_\_

Name \_\_\_\_\_ Sex ☐ Male ☐ Female Race \_\_\_\_\_ DOB \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 Last First Middle

Current Mailing Address \_\_\_\_\_

Alias, Maiden & Prior Married Name(s) \_\_\_\_\_  
*Please write last name AGAIN if no other names used.*

Name & DOB of Spouse & Former Spouse(s) \_\_\_\_\_

Name & DOB of Children / Stepchildren \_\_\_\_\_

Alabama counties where person has lived and/or worked \_\_\_\_\_

**Attach additional pages as needed to provide all information requested above.**

**To be completed by person being cleared**

I authorize the Alabama Department of Human Resources to release information contained in the Child Abuse / Neglect Central Registry about me to the above named person/agency/organization. I hereby waive any right to any review or hearing to which I may otherwise be entitled. I further release the Department of Human Resources, its officers, and employees from any and all claims arising out of or in any way connected to the release or dissemination of any information concerning me.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Signature of Witness \_\_\_\_\_

Date \_\_\_\_\_

**To be completed by DHR**

A search of the Alabama Child Abuse / Neglect Central Registry has been completed with the information provided to determine if the person identified above has been named as being responsible for child abuse or neglect in Alabama. DHR releases only that information which is necessary to discover or prevent child abuse / neglect.

☐ Substantiated report (i.e., indicated) located. See attached information.

Type Report: ☐ Physical Abuse ☐ Neglect ☐ Sexual Abuse ☐ Mental Abuse / Neglect

☐ No report located.

☐ Request Denied \_\_\_\_\_

☐ Other \_\_\_\_\_

Office of Child Protective Services \_\_\_\_\_

Date Completed \_\_\_\_\_