



BOYS & GIRLS CLUB
OF THE BEMIDJI AREA

BE GREAT

Our mission is to inspire and enable all young people, especially those who need us most, to realize their full potential as productive, responsible and caring citizens.

VOLUNTEER APPLICATION

(Please Print)

Name: _____ Phone (Home): _____

Address: _____ Phone (Work): _____

City: _____ E-mail: _____

State: _____ Zip: _____ Current Age: _____ Date of Birth: _____

How did you learn about the Boys & Girls Club of the Bemidji Area? Please check all that apply.

- Walk-In
 Friend/Relative
 Club Employee
 United Way
 High School: _____
 College: _____
 Media (Newspaper, Radio, T.V., Internet, etc.): _____
 Other: _____

What age group would you prefer to work with?

- Mights (1st - 3rd)
 Juniors (4th - 5th)
 Tweens (6th - 7th)
 Teens (8th - 12th)

What area(s) of programming interest you most?

- Education/Tutoring
 Games Room
 Music/Performing Arts
 Facility/Maintenance
 Fine Arts/Crafts
 Technology/Computers
 Administration/Development
 Sports/Fitness
 Teen Programs
 Mentor (collaboration with Kinship North)

Do you hold any special certifications? Check all that apply.

- CPR
 First Aid
 Life Guard
 Other: _____

Please fill in the days and times that you are available to volunteer.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Times						

Total number of hours each week you are available to volunteer: _____

Estimated length of commitment (e.g. 3 months, 6 months, indefinitely, Seasonal, etc.): _____

List any special skills, areas of knowledge and/or experience (including non-English languages):

List any previous volunteer experience(s) (if you have more please list and attach on a separate sheet of paper).

Organization: _____ Address: _____

Supervisor: _____ Telephone: _____ Reason for Leaving: _____

Volunteer Date Range (Month and Year): _____ Duties: _____

What is your occupation? _____ Retired

Name of employer: _____ Address of employer: _____

College/University student: Yes No

Name of school: _____ Location of school: _____

Are you volunteering as part of a Service-Learning course or program? Yes No

If yes, please provide the following: Course title: _____

Instructor's name: _____ Instructor's phone # or email address: _____

Please provide two personal references (excludes relatives).

Name: _____	Name: _____
Address/City/State: _____	Address/City/State: _____
Phone: _____ Length of Relationship: _____	Phone: _____ Length of Relationship: _____
Nature of Relationship: _____	Nature of Relationship: _____

Emergency Contacts:

Name: _____ Phone: _____ Relation: _____

Name: _____ Phone: _____ Relation: _____

Have you ever been convicted of a criminal offense? Yes No

You may be subject to a criminal background check.

If yes, please explain: _____

Are you volunteering as part of a corporate/community program or organization? Yes No

If yes, please give the name of the program/organization (ex. RSVP, Foster Grandparents, etc): _____

Does your employer make a gift after a certain amount of volunteer hours? Yes No

NOTE: Providing the following information is strictly voluntary and confidential. It allows us to better assess our community outreach and is not used in any manner to make decisions or judgments regarding a prospective volunteer.

Gender: Female Male Other/Non-Binary

Race/Ethnicity:

- | | | |
|---|--|---|
| <input type="checkbox"/> Asian/Pacific Islander | <input type="checkbox"/> Black, non-Hispanic | <input type="checkbox"/> Native American/Native Alaskan |
| <input type="checkbox"/> South Asian | <input type="checkbox"/> Hispanic/Latino | <input type="checkbox"/> Mixed-Ethnicity |
| <input type="checkbox"/> Middle Eastern/North African | <input type="checkbox"/> White, non-Hispanic | <input type="checkbox"/> Other: _____ |

BY SIGNING THIS DOCUMENT I AM AWARE THAT THE BOYS & GIRLS CLUB OF THE BEMIDJI AREA MAY CONTACT THE ABOVE LISTED REFERENCES. YOU WILL BE CONTACTED BY THE CLUB'S VOLUNTEER COORDINATOR ONCE THE FORMS ARE RECEIVED AND THE BACKGROUND INVESTIGATION IS COMPLETED. VOLUNTEERS WILL NOT BE PERMITTED TO ENGAGE IN ANY UNSUPERVISED VOLUNTEER ACTIVITIES PRIOR TO THE COMPLETION OF THE CHECK.

Applicant Signature: _____

Date: _____

PLEASE RETURN COMPLETED APPLICATIONS TO BOYS AND GIRLS CLUB OF THE BEMIDJI AREA

Mailing Address: P.O. Box 191 • Bemidji, MN 56619/Physical Address: 1600 Minnesota Ave. • Bemidji, MN 56601

www.bgcbemidji.org • 218-444-4171 • Facebook

Updated- Sept 2020