



Volunteer Application

First Name _____ Middle _____ Last _____

Address _____ Apt# _____

City _____ State _____ Zip Code _____

Email address: _____

Primary Phone: _____ Secondary Phone: _____

Work Phone: _____ Ext. _____ Gender Female Male Date of Birth ___/___/___

Office Use Only:

Date Application Received: _____

Recruited by: _____

Received via:

- Email
- Paper
- Web

CES Date Received: _____

Reason for Applying:

- Volunteer Match
- Facebook
- Twitter
- Flyer
- Recruitment
- Alumni
- Word of Mouth

Office Use Only:

Interview Date: _____

Interview by: _____

- Acceptable
- Unacceptable

Reason for Volunteering:

- Community Service
- Community Service Requirement
- Former Girl Scout
- Parent of Girl Scout
- Other _____
- Student Course Work
- Want to work with Youth

Volunteer Type:

- Directly working with girls
- Indirectly working with girls
- Both

Volunteer Class:

- Ongoing
- One Time
- Short Term
- Seasonal
- Other

Best Time to Call

- Morning
- Afternoon
- Evening

Availability:

- Contact Me
- Other _____
- Immediate

Mark Times Available:

Day	AM	PM
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Do you own your own transportation?

- Yes
- No

Distance willing to travel?

- Less than 5 miles
- 5 to 10 miles
- 10 to 25 miles
- 25 to 50 miles
- Over 50 miles

Hours available to Volunteer per week?

- Less than 5 hours
- 5 to 10 hours
- 10 to 20 hours
- Over 20 hours

Preferred Location:

City _____

County _____

Nearest school: _____

Location NOT Preferred:

City _____

County _____

Nearest school: _____

CONFIDENTIAL INFORMATION:

The Girl Scout Council of the Southern Appalachians request the following information because of our dedication and commitment to the girls that we serve. All youth-serving organizations must take reasonable precautions when appointing adults who work directly with children. This confidential section contains information required by current legislation and Girl Scout safety regulations. This application is confidential and is for internal use only.

Social Security #: _____ - _____ - _____

Vehicle Use: Do you plan to use your vehicle for Girl Scout Activities?

- Yes
- No

Drivers License State: _____

Exp. Date: _____

Driver's License #: _____

Type: _____

Insurance Carrier: _____

Policy #: _____

VOLUNTEER QUALIFICATIONS: List any certifications with correct information below to help determine placement. Additional certifications may be included on a separate sheet. **(Activity Detail)**

Certification

Activity Type: *(choose one)*

- Basic Leader
- Camp
- CPR
- First Aid
- First Aid_CPR
- Other _____

Level:

- Advanced
- Intermediate
- Standard

Status:

- Active
- Expired
- Pending

Effective Date ____/____/____

Expiration Date ____/____/____

Certification

Activity Type: *(choose one)*

- Basic Leader
- Camp
- CPR
- First Aid
- First Aid_CPR
- Other _____

Level:

- Advanced
- Intermediate
- Standard

Status:

- Active
- Expired
- Pending

Effective Date ____/____/____

Expiration Date ____/____/____

Volunteer Experience: *Mark all that apply.*

- As a Girl Scout Volunteer
- As a Volunteer for other organization

List organization:

- Working with children

List organization:

Languages: *Mark all that apply.*

- Arabic
- Chinese-Cantonese
- Chinese-Mandarin
- Chinese-WU
- French
- German
- Italian
- Korean
- Polish
- Russian
- Spanish
- Tagalog
- Vietnamese

VOLUNTEER SKILLS: *(Circle skill level)*

<input type="radio"/> Accounting	Beginner	Intermediate	Expert
<input type="radio"/> Arts & Crafts	Beginner	Intermediate	Expert
<input type="radio"/> Bicycling	Beginner	Intermediate	Expert
<input type="radio"/> Camping	Beginner	Intermediate	Expert
<input type="radio"/> Dancing	Beginner	Intermediate	Expert
<input type="radio"/> Dramatics	Beginner	Intermediate	Expert
<input type="radio"/> Gymnastics	Beginner	Intermediate	Expert
<input type="radio"/> Hiking	Beginner	Intermediate	Expert
<input type="radio"/> Literature	Beginner	Intermediate	Expert
<input type="radio"/> Music	Beginner	Intermediate	Expert
<input type="radio"/> Other _____	Beginner	Intermediate	Expert
<input type="radio"/> Outdoor Activities	Beginner	Intermediate	Expert
<input type="radio"/> Photography	Beginner	Intermediate	Expert
<input type="radio"/> Science	Beginner	Intermediate	Expert
<input type="radio"/> Sports	Beginner	Intermediate	Expert
<input type="radio"/> Swimming	Beginner	Intermediate	Expert
<input type="radio"/> Water Sports/Boating	Beginner	Intermediate	Expert

VOLUNTEER INTERESTS: *(Mark all that apply)*

<p>Grade Level</p> <ul style="list-style-type: none"> <input type="radio"/> Daisy (k-1) <input type="radio"/> Brownie (2-3) <input type="radio"/> Junior (4-5) <input type="radio"/> Cadette (6-8) <input type="radio"/> Senior (9-10) <input type="radio"/> Ambassador (11-12) 	<p>Innovative Program</p> <ul style="list-style-type: none"> <input type="radio"/> Girls Scouts Beyond Bars <input type="radio"/> C.H.O.I.C.E <input type="radio"/> Discovery Program / Girls Night out <input type="radio"/> Engineering, Science & Technology <input type="radio"/> Hispanic Initiative Program <input type="radio"/> Other 	<p>Office Use Only:</p>
<p>Indirect Service</p> <ul style="list-style-type: none"> <input type="radio"/> Accounting <input type="radio"/> Communications <input type="radio"/> Community Cultivation <input type="radio"/> Customer Service <input type="radio"/> Event Coordination <input type="radio"/> Interviewing <input type="radio"/> Learning Facilitation/ Training <input type="radio"/> Other <input type="radio"/> Product Sales <input type="radio"/> Quality Assurance <input type="radio"/> Recruiting <input type="radio"/> Trip Planning <input type="radio"/> Volunteer Mentoring 	<p>Pathway</p> <ul style="list-style-type: none"> <input type="radio"/> Camp <input type="radio"/> Events <input type="radio"/> Special Interests <input type="radio"/> Travel <input type="radio"/> Troops <input type="radio"/> Virtual 	
	<p>Guest Speaker/ Presenter</p> <ul style="list-style-type: none"> <input type="radio"/> Experienced <input type="radio"/> Inexperienced 	

Affirmation & Signature

In the selection of volunteers, I understand there shall be no discrimination against an otherwise qualified individual on the basis of race, color, ethnicity, sex, religion, creed, national origin, socioeconomic status, age, disability, marital status, veteran status, or any other status prohibited by state or local law.

In signing this form, I affirm that the statements contained within are true and complete to the best of my knowledge, and that I have not knowingly withheld any information that might, if disclosed, affect my application unfavorably. I understand that any misrepresentation or omission of facts on this application will be cause for rejection or later dismissal.

I agree to provide additional information that may be requested to process my volunteer application. If required, I will submit a fingerprint sample.

I hereby authorize the Girl Scout Council of the Southern Appalachians to contact all my volunteer, education, and personal references. I further authorize these references to release to you any information needed.

I authorize verification of all information provided on my volunteer application from all sources of motor vehicle, criminal history, consumer report, and sex offender records in accordance with the Girl Scout Council of the Southern Appalachians' policy and procedures. I authorize any duly authorized agent of the Girl Scout Council of the Southern Appalachians and IntelliCorp Records, Inc. to obtain these records, whether the said records are public or private and including those which may be deemed to be privileged or confidential in nature. I release all persons from liability on account of such disclosures. Information appearing in this application will be used exclusively for identification purposes and for the release of information which will be considered in determining suitability for volunteerism.



I have the right to make a request to IntelliCorp Records, Inc. upon proper identification, the nature and substance of all information in its files on me at the time of my request, including sources of information, and the recipients of any reports on me which IntelliCorp Records, Inc. has previously furnished within the two year period preceding my request.

This is not an application for employment.

Signature _____

Date _____

Please return to the office nearest you. You will be contacted upon review of your application.

 **Girl Scout Council of the Southern Appalachians** 
800.474.1912

Knoxville Service Center

1567 Downtown West Blvd.
Knoxville, TN 37919
FAX 865.689.9835

Johnson City Service Center

1100 Woodland Avenue
Johnson City, TN 37601
FAX 423.929.8117

Chattanooga Service Center

1936 Dayton Blvd.
Chattanooga, TN 37415
FAX 423.877.5587