

# YWCA Volunteer Application Form

## Volunteer Applicant Information:

Name \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

## Time Availability:

Would you like to be part of an ongoing YWCA program?       yes       no

Would you like to be involved in a YWCA special event?       yes       no

When can you start? \_\_\_\_\_

When are you available?

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Time							

## Areas of Interest and Experience:

Volunteer Position(s) of Interest:

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Relevant Experience:

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What do you feel that you will get out of volunteering with the YWCA?

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## References:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Relationship \_\_\_\_\_



**CONFIDENTIAL**

**Background Check Disclosure Notice-Authorization Form**

Print Name: \_\_\_\_\_  
(Last Name) (First Name) (Middle Name or Initial)

Other Name(s): \_\_\_\_\_  
Used in any and all other records of birth or records of residence.

Current Address: \_\_\_\_\_ City: \_\_\_\_\_

County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State Issues: \_\_\_\_\_

\*Please list all Cities and States lived in for the last 10 years\*

Dates	City	State

**The Following are my responses to questions about my criminal history, if any.** (Exclude minor traffic offenses.) IF YOU ANSWER YES TO ANY OF THE FOLLOWING QUESTIONS, ATTACH DETAILS ON A SEPARATE SHEET OF PAPER INCLUDE THE STATE, COUNTY, DATE OF OFFENSE AND DETAILS OF CONVICTION.

1. Have you ever been convicted or pleaded guilty before a court for any federal, state, or municipal criminal offenses? Yes\_\_\_ No\_\_\_
2. Have you been convicted of any criminal offense outside of the State of Montana? Yes\_\_\_ No\_\_\_
3. As of the date of this consent form, do you have any pending charges against you? Yes\_\_\_ No\_\_\_

**The information contained in this application is correct to the best of my knowledge. I hereby authorize YWCA Great Falls and its designated agents and representatives to conduct a background check for employment and/or volunteer purposes.**

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

**THIS SECTION TO BE COMPLETED BY YWCA GREAT FALLS**

Position/Volunteer Title: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Verified Social Security Number and Driver's License #: \_\_\_\_\_(Initial)