



# Carroll County Community Center

### Personal Information

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Work/Cell \_\_\_\_\_ Email \_\_\_\_\_

How did you hear about this volunteer opportunity? \_\_\_\_\_

Volunteer Interest(s)/Special Skills, Training or Experience: \_\_\_\_\_

Community Service Requirement ? YES  NO  Number of hours needed \_\_\_\_ Deadline \_\_\_\_

Are you a CCCC member? YES  NO

Are you a CCCC donor?  YES  NO

Are you over 18?  YES  NO

### Availability

Please indicate the days and hours you are available to volunteer:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday

### Employment Information

Please indicate if you are retired or unemployed. NOTE: Work experience is not a requirement to volunteer.

Current Employer	Title	Supervisor	Phone

### Volunteer Information

Please list current or previous volunteer experience:

Organization	Role/Experience

### References (REQUIRED)

NOTE: The Y checks references on all volunteers, as such the following information is required of all applicants.

Name	Phone	E-Mail	Relationship to you	How long have you know this person

### Required Information

Have you ever been convicted of a crime? (Exclude any marijuana offenses that are over two years old and minor traffic violations for which the fine was \$100.00 or less). YES  NO

If yes, please state the date, location, and circumstances.

Are you a registered sex offender? YES  NO

NOTE: The existence of a criminal record will not constitute an automatic bar to volunteering.



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## *Agreement*

I hereby certify that all answers and statements made on this application are complete and true to the best of my knowledge. I am not a pedophile or child molester and have not been convicted of either. I understand that any misleading, misrepresentation and/or omission of information will cause this application to be rejected and will be grounds for discharge. I further understand that final volunteerism is based on completion of all volunteer screening requirements and procedures, including interview(s), reference checks, verifications, physical examination and fingerprinting.

I authorize all organizations and persons named above to give information about me and I hereby release them of all liability. I have carefully read and understand this application and, by my signature below, consent to the release of consumer or investigative consumer reports (fingerprints) to the CCCC in conjunction with my application for volunteering. I further understand that any and all information contained in my volunteer application or otherwise disclosed to the CCCC by me before, during or after my volunteerism, if any, may be utilized for the purpose of obtaining the consumer reports (reference checking) or investigative consumer reports requested by the CCCC.

If I am engaged as a CCCC Volunteer, I agree to observe all rules, regulations, policies and procedures as they relate to the CCCC of Carroll County employees at all times. I also understand that, although I may be volunteering for a particular position and shift, it may be necessary to accept different assignments, schedules or hours.

I hereby certify that all of the facts set forth in my application are true and complete. I understand that if I am engaged as a CCCC Volunteer, false information on this form or failure to disclose material facts will be considered grounds for discharge. I further understand that my services are on a volunteer basis for which no compensation is provided, and that these services are at-will and may be terminated at any time by either party.

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

**Signature of Parent or Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(If you are under 18)

*Again, thank you for your interest!!*