



District 5040 Youth Programs

Volunteer Application

District 5040 is committed to creating and maintaining the safest possible environment for all participants in Rotary activities. It is the duty of all Rotarians, Rotarians' spouses, partners, and any other volunteers to safeguard to the best of their ability the welfare of and to prevent the physical, sexual, or emotional abuse of children and young people with whom they come into contact.

PERSONAL INFORMATION

Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Email: _____

Business Phone: _____ Fax: _____

How long at this address? _____ (If less than five years, please list prior residence(s) on the back of this sheet.)

Are you a member of a Rotary club? Yes _____ No _____

If yes, please give club name and year joined: _____

Position Applied for: Host family: _____ Youth counselor: _____ Other Youth volunteer: _____

Have you held a Youth Programs position in the past? Yes _____ No _____

If yes, what position and when? _____

EMPLOYMENT HISTORY (past 5 years - please attach additional sheets, if necessary)

Current Employer: _____

Address/City/Prov/Postal Code: _____

Telephone: _____ Position: _____

How long with this company? _____ Supervisor's Name: _____

Previous Employer: _____

Address/City/Prov/Postal Code: _____

Telephone: _____ Position: _____

How long with this company? _____ Supervisor's Name: _____

Do you have a volunteer history with youth? (Circle answer) Yes No

If yes please fill out the following information:

VOLUNTEER HISTORY WITH YOUTH (past 5 years - please attach additional sheets, if necessary)

Organization Name: _____

Address/City/Prov/Postal Code: _____

Telephone: _____ Position: _____

Dates Held: _____ Director's Name: _____

Previous Organization: _____

Address/City/ Prov/Postal Code: _____

Telephone: _____ Position: _____

Dates Held: _____ Director's Name: _____

PERSONAL REFERENCES (not relatives and not more than one former or current Rotarian).

1.

Name: _____

Address: _____

Telephone: _____

Relationship: _____

2.

Name: _____

Address: _____

Telephone: _____

Relationship: _____

3.

Name: _____

Address: _____

Telephone: _____

Relationship: _____

QUALIFICATIONS AND TRAINING

What qualifications and/or training do you have relevant to youth programs for this position? Please describe in full.

CRIMINAL HISTORY

1. Have you ever been convicted of or plead guilty to any crime(s)? **Note that Applicant must attend their local RCMP detachment in person and request a criminal record extract and have it sent, or deliver it, to the Rotary Youth Officer in the Rotary Club in contact with the Applicant.**

yes no

2. Have you ever been subject to any court order involving any sexual, physical or verbal abuse including but not limited to any domestic violence or civil harassment injunction or protective order?

yes no

WAIVER/CONSENT/RELEASE

I certify that all of the statements in this application, and in any attachments hereto, are complete, true and correct to the best of my knowledge.

I hereby give my permission for Rotary International, Rotary International District 5040 Inc., and their members involved in the administration of youth programs ("District 5040") to investigate, verify and obtain information given in this application, including searches of law enforcement and published records (including driving records and criminal background checks), contact with former employers and reference interviews. I understand that this information will be used, in part, to determine my eligibility for a volunteer position with the District 5040 youth programs. I also understand that as long as I remain a volunteer here, the criminal history records check may be repeated at any time. I understand that I will have an opportunity to review the criminal history and that there is a procedure available for clarification, if I dispute the record as received.

I specifically acknowledge that I have a continuing obligation to disclose any new circumstances that may affect the suitability of myself and my family to participate as a volunteer in District 5040 Youth Programs.

IN CONSIDERATION of my acceptance and participation in the Youth programs, I, to the full extent permitted by law, hereby release and agree to save, hold harmless and indemnify, District 5040, all members, officers, directors, committee members and employees of the participating Rotary Clubs and Districts, and of Rotary International ("Indemnities"), from any or all liability for any loss, property damage, personal injury or death, including any such liability which may arise out of the negligence of any of the Indemnities, which may be suffered or claimed by me as a result of an investigation of my background in connection with this application.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE APPLICATION, WAIVER, CONSENT AND RELEASE, AND THAT I SIGN THIS FORM VOLUNTARILY.

Signature of Applicant

Please Print Name

Date

District policy requires that volunteers be screened every 4 years including criminal record checks

ROTARY THANKS YOU FOR BEING WILLING TO VOLUNTEER AND MAKE YOUTH PROGRAMS POSSIBLE.

Revised July 2011