



VOLUNTEER APPLICATION

Date of Application \_\_\_/\_\_\_/\_\_\_

Name: Last First M.I. Social Security Number: \_\_\_/\_\_\_/\_\_\_

Address: Street/P.O. Box City State Zip Code

Telephone Numbers: Home: (\_\_\_) \_\_\_-\_\_\_ Other: (\_\_\_) \_\_\_-\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Drivers License No. State issued: Expiration Date: Class:

Emergency Contact Person: Telephone Number: (\_\_\_) \_\_\_-\_\_\_

Educational Information High School Graduate College Degree: \_\_\_

List your education and/or work experiences that would benefit the volunteer position(s) for which you are applying:

Volunteer Experience

Have you ever volunteer before? Yes No If yes please fill in below: Organization: What type of volunteering did you do?

Reason for volunteering:

Have you ever worked here before? Yes No If yes please fill in: Unit Name: Phone #: (\_\_\_) \_\_\_-\_\_\_

- Please check the activities you would be interested in volunteering. Small Group Work, Large Group Work, Sports, Alcohol/Tobacco/Drug Prevention Program, Mentoring, Leadership Dev., Teen Room, Tutoring, Computers, Game Room, Other, Performing Arts, Fine Arts, Community Service, Reading, Photography

Availability

What age(s) youth would you like to volunteer with? Check all that apply. (5-6) (7-9) (10-12) (13-15) (16-18)

- Unit you would like to volunteer with: Hancock County Unit-Bay St. Louis, MS, Forest Heights Unit-Gulfport, MS, Qatar Center @ Pass Christian Unit- Pass Christian, MS, East Biloxi Unit-Biloxi, MS, IP Center at North Bay - D 'Iberville, MS

Would you be interested in volunteering at special events? Yes No What days would you like to volunteer? Monday Tuesday Wednesday Thursday Friday Saturday Hours:

References

List three references other than relatives that have knowledge of your qualifications, morals and/or character. Please include full name, address and phone number.

- 1) ( ) 2) ( ) 3) ( )

## Voluntary Self-Identification Affirmative Action Information

*This form will be detached from the employment application. It is not part of the employment process.*

### An Equal Opportunity Employer

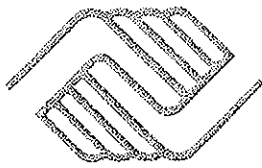
The Boys & Girls Clubs of the Gulf Coast (BGC GC) provides equal opportunity for all qualified applicants and employees, without regard to race, color, religion, sex, national origin, age, disability, veteran status, gender identity, political preference, sexual orientation, marital status, citizenship, or other status protected by law or regulation. The BGC GC prohibits discrimination in any aspect of employment, including hiring, promotion, demotion, transfer, layoff or termination, rates of pay, or selection for training. The BGC GC also undertakes affirmative action programs to facilitate full and equal participation of all employees in the opportunities available within BGC GC.

Position: \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_  
Last, First MI

The BGC GC is subject to certain governmental recordkeeping and reporting requirements for the administration of civil rights laws and regulations. In order to comply with these laws, the BGC GC invites employees to voluntarily self-identify their race/ethnicity and gender. Your response will facilitate the BGC GC's equal employment opportunity efforts and assure that BGC GC records reflect accurate information. Submission of this information is voluntary and refusal to provide it will not subject you to adverse treatment. Employment decisions will not be based on whether or not you provide the information, and this information will not become part of your applicant file. The information will be kept confidential and will only be used in accordance with the provisions of applicable laws, executive orders, and regulations, including those that require the information to be summarized and reported to the federal government for civil rights enforcement. Where reported, data will not identify any specific individual. Please check one box in response to each section (1 & 2). (See definitions below for assistance.)

Section	Definition
<b>1. Race/Ethnic Groups</b>	
<input type="checkbox"/> Hispanic or Latino	Persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
<input type="checkbox"/> White	(Not Hispanic or Latino) Persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.
<input type="checkbox"/> Black or African American	(Not Hispanic or Latino) Persons having origins in any of the black racial groups of Africa.
<input type="checkbox"/> Native Hawaiian or Other Pacific Islander	(Not Hispanic or Latino) Persons having origins in any of the peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
<input type="checkbox"/> Asian	(Not Hispanic or Latino) Persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
<input type="checkbox"/> American Indian or Alaskan Native	(Not Hispanic or Latino) Persons having origins in any of the original peoples of North and South America (including Central America), and who maintain tribal affiliation or community attachment.
<input type="checkbox"/> Two or More Races	(Not Hispanic or Latino) All persons who identify with more than one of the above five races.
<b>2. Sex</b>	
<input type="checkbox"/> Male	
<input type="checkbox"/> Female	



**DISCLOSURE TO BOARD MEMBER/VOLUNTEER AND CONSENT TO CONSUMER BACKGROUND INVESTIGATION**

In connection with your Application for Board Member/Volunteer, we may conduct an investigation into your consumer credit history, character, general reputation, personal characteristics and/or mode of living, including criminal records, by obtaining a consumer report from one or more consumer reporting agencies, including credit reporting agencies. This investigation may require that you provide your fingerprints and that your consent to the investigation includes your agreement to provide your fingerprints if requested and to have them used to obtain information as part of the investigation. The purpose of this notice is to make you aware of this investigation and to explain your rights regarding this investigation, in accordance with the Fair Credit Reporting Act, as amended by the Consumer Credit Reporting Reform Act of 1996, 15 U.S.C. § 1681-1681u (the "Act").

1. The consumer information obtained will be used only for the permissible purpose of verifying your suitability to become a Board Member/Volunteer for Boys & Girls Clubs of the Gulf Coast (BGCGC), and not for any other purpose. It will not be used in violation of any federal, state or local equal employment opportunity law or regulation.
2. You are entitled to learn the nature and substance of the information in your consumer report which BGCGC receives, by sending a written request to The Director of Finance/Human Resources. The information will be provided within 5 business days of receipt of your request.
3. If you are denied the ability to become a Board Member/Volunteer because of your consumer report, BGCGC will provide to you: (a) a copy of your report, and (b) a written description of your rights under the Act, including your right, within 60 days of BGCGC's decision, to obtain a free copy of your consumer report from the consumer reporting agency.
4. Please read the following Consent form carefully. If you consent to this investigation, sign where indicated. You will be given a copy of this Consent for your records.

**CONSENT TO CONSUMER BACKGROUND INVESTIGATION**

I consent to an investigation by and authorize the Boys & Girls Clubs of the Gulf Coast (BGCGC) or any person or consumer reporting agency it may employ for this purpose, to obtain my consumer report, including my credit history, character, general reputation, personal characteristics and/or mode of living, including any criminal records. I understand that this investigation may require that I provide my fingerprints and that my consent to the investigation includes my agreement to provide my fingerprints if requested and to have them used to obtain information as part of the investigation. I release BGCGC, its employees, and any and all such persons and consumer reporting agencies contacted from any and all liability for any damage flowing from the disclosure of this information and BGCGC's actions taken thereon.

Name: \_\_\_\_\_  
Title Last First M.I. Social Security Number

Present Address \_\_\_\_\_  
No. Street City State Zip Code

Telephone Numbers: Home: (\_\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

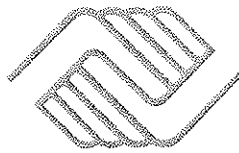
Date of Birth: \_\_\_\_\_ Unit: \_\_\_\_\_

Driver's License: \_\_\_\_\_ Issuing State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

FOR OFFICIAL USE ONLY			
Date Report Requested	Initials	Date Report Received	Initials
Location		Position	



**BOYS & GIRLS CLUBS**  
OF THE GULF COAST

**Corporate Board  
Of Directors**

Margaret Taylor  
*President*

Peter Morgan  
*VP Financial  
Support/Treasurer*

Angie Juzang  
*VP Organizational Support*

Gary Gray  
*VP Operation Support*

Scott Lusk  
*Secretary*

Dr. David Spinks  
*Executive Director*

- Susan Carron
- Rev. Christopher Colby
- George Corchis Jr.
- Tonya Chevis
- Jane Dennis
- Jerry Dodge
- Jeffery Guice
- Marc "Forrest" Holman
- Jimmy Johnson
- Angie Juzang
- Michael Lizana
- Dr. Alfred McNair
- Erin Moseley
- Chris Moore \*
- Rep. Steven Palazzo
- Bradley Rhines
- Sup. Windy Sweetman III
- Dick Wilson \*
- Duane Wilson
- Wade Howk
- Wes Fulmer\*
- \*Past President

Emeritus Members

- Gerald Blessey
- Ann Bowden-Hollis
- Arlene Canaan
- Ronald Marion
- Bruce Stewart \*
- Rep. Michael Janus
- Senator Tommy Gollott \*
- Brian Sanderson\*

**Administrative Office**  
11975 Seaway Road A-160  
Gulfport, MS 39503

(228) 896-3770 Phone  
(228) 896-3720 Fax

Email  
info@bgcgulfcoast.org  
Website  
www.bgcgulfcoast.org

To: Mississippi Department of Human Services  
Division of Family & Children Services  
Child Abuse Central Registry  
P.O. Box 352  
Jackson, MS 39205

From: Director of Human Resources  
Boys & Girls Clubs of the Gulf Coast  
11975 Seaway Road, Suite A-160  
Gulfport, MS 39503

\_\_\_\_\_  
Last First MI Maiden Aliases

Social Security Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Applicant's Telephone Number: \_\_\_\_\_

Applicant's Physical Address: \_\_\_\_\_

By signing this form, I give the above named agency permission to request an MDHS Child Abuse/Neglect Central Registry background check. I understand that this information will be used only for services related to the above named agency and will not be re-disseminated to other persons or for other purposes.

\_\_\_\_\_  
Applicant's Signature Date

I have witnessed the applicant's signature and the information is true and attested by my viewing of the applicant's Social Security Card and Driver's License. I understand that this information must be kept confidential with my agency.

\_\_\_\_\_  
Signature of Witness Date  
(Witness must be a representative of BGCGC)

\*\*\*\*\*

This section to be completed by MDHS Office

\_\_\_\_\_ No identifying information was found in the Central Registry

\_\_\_\_\_ The following information was found in the Central Registry

\_\_\_\_\_  
Signature of MDHS Representative Date