

The Women's Sports Foundation Volunteer Application

Application Date: \_\_\_\_\_

**PART I – PERSONAL DATA**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Are you 18 years old or older?  Yes  No

How were you referred to us?

Advertisement  Volunteer  School

Other (Please describe: \_\_\_\_\_)

**Education:** List below your education background, including high school, all colleges, trade and military service schools.

<u>School</u>	<u>Location (city &amp; state)</u>	<u>Major</u>	<u>Graduated (please respond yes or no)</u>	<u>Degree</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Please identify any foreign languages in which you are fluent: \_\_\_\_\_

Computer skills: \_\_\_\_\_

**Employment History:** Please list your job history for the past five years in chronological order. You may attach a resume, but please be sure to complete this Application as well. You may include work performed on a volunteer basis.

<u>Employer (start with current)</u>	<u>Address &amp; Telephone #</u>	<u>Dates of Employment</u>

**Volunteer Work:** Please describe your prior volunteer experience, with a particular emphasis on work that may be relevant to this application. (Include organization names and dates of service.)

**References:** Please list two persons best qualified to comment on your related experience and/or educational background.

<u>Name</u>	<u>Telephone</u>	<u>Title/Relationship</u>

Have you ever been convicted of a crime?  Yes  No

(If yes, please explain the nature of the crime and the date of the conviction and disposition. Please note that a "Yes" response to this question will not necessarily disqualify a volunteer.)

Are you the subject of an indicated child abuse and maltreatment report on file with the New York Central Registry of Child Abuse and Maltreatment or elsewhere? (If yes, please explain the nature of the incident and give the date of the report.)  Yes  No

**PART II – The Women's Sports Foundation**

What season/day/time are you most available to volunteer? Our hours are Monday – Friday 9:00 am – 5:00 pm

- Winter  Spring  Summer  Fall
- Monday \_\_\_\_\_  Tuesday \_\_\_\_\_  Wednesday \_\_\_\_\_
- Thursday \_\_\_\_\_  Friday \_\_\_\_\_

What interests do you wish to pursue or what do you hope to accomplish by serving as a volunteer at The Women's Sports Foundation?

Do you possess a valid Driver's License?  Yes  No

(Note: Your motor vehicle driving record will be checked if the volunteer position you seek involves transportation of others in your personal vehicle.)

**PART III – Certification**

I certify that the information provided in this Application is true and accurate. I understand that withholding of any information sought by this Application, or the giving of false information on this Application may result in my disqualification from consideration for volunteer service for The Women's Sports Foundation or, if discovered after I have begun volunteering, my termination as a volunteer.

I hereby grant permission for any person, firm or corporation to release to The Women's Sports Foundation or its representatives any and all information regarding my education, background, and past or present volunteer work and employment, including for a criminal background check. I knowingly and voluntarily waive any and all claims I might have with respect to the providing of such information.

I understand and agree that my position at the Women's Sports Foundation is entirely voluntary and without compensation. I further understand that the provisions of this application do not constitute a contract (either expressed or implied) of employment between me and the Women's Sports Foundation. I further understand and agree that if I am offered and accept a volunteer position at the Women's Sports Foundation, either the Women's Sports Foundation or I may terminate the volunteer relationship at any time for any reason or no particular reason or cause. The Women's Sports Foundation reserves the right to determine and change its policies and procedures applicable to volunteers at any time for any reason.

**I HAVE READ THE ABOVE PRIOR TO SIGNING THIS APPLICATION.**

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