BOYS & GIRLS CLUBS
OF GREATER ST. LOUIS

VOLUNTEER APPLICATION

All volunteer applications are screened for background check through ChoicePoint which provides a complete search through 50 states.

PERSONAL DATA

NAME_____

ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____

HOME PHONE _____ WORK PHONE _____ EMAIL _____

SOCIAL SECURITY NUMBER _____-_____-_____ Date of Birth: Month _____ Day _____ Year _____

(Required for background search only.)

Do you have any physical or medical condition that affects your ability to perform certain activities? Please let us know.

_____

Is this a court ordered community service? If so, what is the charge?

_____

EDUCATION

Check highest level completed: _____ High School _____ College _____ Graduate _____ Post Graduate

COLLEGE/UNIVERSITY

NAME & LOCATION _____ FROM/TO _____ MAJOR/DEGREE _____

CURRENT EMPLOYMENT

EMPLOYER _____ POSITION _____

Please select up to three (please rank 1, 2, and 3) in order of preference to indicate your preferred option.

Day Time School Mentoring:

_____ Cote Brilliante Elementary School 2616 Cora 63113
_____ Dunbar Elementary School 1415 N. Garrison 63106
_____ Farragut Elementary School 4025 Sullivan 63107
_____ Jefferson Elementary School 1301 Hogan Ave. 63106
_____ Sherman Elementary School 3942 Flad 63110

Volunteer at one of our Clubs:

_____ Herbert Hoover Club 2901 North Grand Ave. 63107
_____ Adams Park Club 4317 Vista Ave. 63110
_____ Southeast Middle School Club 918 Prigge Rd. 63138
_____ Hazelwood East Middle School Club 1865 Dunn Rd. 63138

Select day(s) and time(s) you are available to volunteer.

_____ Mon _____ Tue _____ Wed _____ Thu _____ Fri _____ No preference

continued

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Optional Information: This information will assist with the matching/placement process.

Your Gender: _____ Male _____ Female

Ethnicity: _____ African-American _____ Asian _____ Caucasian

_____ Hispanic/Latino _____ Native American _____Bi-Racial _____ Other

VOLUNTEER INTERESTS - We recognize and value your commitment to becoming a mentor/role model to a Boys & Girls Clubs of Greater St. Louis member. And we wanted you to know of the many additional volunteer opportunities. If interested, please select those programs.

___ Tutor ___ Sports Coach ___ Arts & Crafts ___ Office ___Mentor

___ Dance ___ Computers ___ Photography ___ Scouting

___ Cheerleaders ___ Fitness ___ Nutrition ___ Other_____

REFERENCES

NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____

Phone # _____Email _____

NAME _____
ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____

Phone # _____Email_____

EMERGENCY CONTACT

NAME _____ PHONE _____
NAME _____ PHONE _____

_____ _____
Your Signature Date

Please mail, fax, or scan information to:

Lindsey Nienhuis, Volunteer Coordinator
2901 N. Grand Ave., St. Louis, MO 63107
(314) 335-8141 (direct), (314) 652-7509 (fax)
lindsey@bgcstl.org, www.bgcstl.org

Confidential information is deleted once successful background check is completed.