



Girl Scouts Heart of Michigan Volunteer Application

Personal Information

Please complete entirely. Feel free to attach additional sheet(s)/information.

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Business Phone _____

Mobile Phone _____ Preferred E-mail _____

Current Employer _____ Occupation _____

Best time to reach you _____ Preferred contact method: mobile e-mail home

Interests Indicators

Indicate Volunteer Preference:

Work with girls: K-1 2-3 4-5 6-8 9-12

Work with adults

Committee/group work

Volunteer Position(s) desired (if known) _____

Experience, Volunteer & Girl Scout Background

List volunteer and other experience pertinent to position listed above _____

List specialized skills/talents/interests _____

Current Certifications/Licenses

First Aid CPR Lifeguarding Water Safety Instructor

Other _____

Are you currently registered as a member of Girl Scouts? _____

If you have volunteered with Girl Scouts previously, council name _____

If you have been involved with Girl Scouts previously, how long and in what position(s)? Include girl membership. _____

Availability

What is your volunteer availability? (Check all that apply)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Mornings							
Lunchtime							
Afternoons							
After School							
Evenings							

I would like to volunteer during the following weeks _____

I would like to volunteer during the following months _____

I would like to volunteer for a year, beginning _____

I would like to volunteer longer than a year, beginning _____

Background

Have you even been convicted of a misdemeanor or felony? Yes No

Are there any felony charges currently pending against you? Yes No

If yes, state offense, date and location (A conviction record will not necessarily be cause for disqualification.) _____

Are you or one of your family members listed on the Sex Offenders' List? Yes No

References

List three persons *who are not relatives* and have agreed to serve as a reference, and who can speak to your qualifications to be a Girl Scout volunteer. If you have previous volunteer experience in another organization, one of the references should be from that organization. If you have previously worked with children, one of your references should relate to that particular experience.

Name _____ Phone _____ Email _____

Address _____ City/State/Zip _____

Name _____ Phone _____ Email _____

Address _____ City/State/Zip _____

Name _____ Phone _____ Email _____

Address _____ City/State/Zip _____

I certify that all information provided on this application is true and complete. I understand that falsification or significant omissions of any information may be considered justification for non-acceptance or dismissal if discovered at a later date. I agree to promptly register as a member of Girl Scouts of Girl Scouts of the USA, abide by the principles of Girl Scouting as stated in the Promise and Law and complete the adult education requirements by Girl Scout Heart of Michigan for this position.

Signature _____ Date _____

There shall be no discrimination against an otherwise qualified adult volunteer by reason of disability or on the basis of age. Furthermore, there shall be no discrimination on the basis of race, color, ethnicity, sex, creed, national origin, or socioeconomic status. In addition, to ensure full equality of the organization, affirmative action policies and procedures shall be utilized in the recruitment, selection, training, placement, and recognition of volunteers. Special emphasis shall be placed upon securing representation of underrepresented population groups.
—*Girl Scouts Blue Book of Basic Documents 2006*