girl scouts
heart of michigan

Volunteer Application Packet

We are thrilled that you are interested in volunteering for Girl Scouts Heart of Michigan (GSHOM)! As a Girl Scout volunteer, you'll add meaningful opportunities to girls' lives and to your own. Whether you choose to work directly or indirectly with girls, on a short-term or long-term basis, you will receive all the instruction, guidance, and support you'll need to impact girls' lives.

Your initial step in becoming a Girl Scouts Heart of Michigan volunteer is completing the Volunteer Application Packet and Girl Scouting 101 (GS101). This packet contains the following:

1. **Instructions for completing Girl Scouting 101 (GS101)**: A self-paced interactive tour of Girl Scouting that lasts about 45 minutes.
2. **Volunteer Interest Form**: Application for becoming a volunteer for GSHOM.
3. **Background Check**: Authorization for GSHOM to perform confidential criminal background check on any adult volunteer who works directly with girls or handles money.
4. **Confidential Reference Forms**: Character reference to be completed by anyone listed on volunteer interest form as a reference.

Note: Once the forms are completed, please return them to your nearest regional center.

(more on next page...)

Instructions for completing Girl Scouting 101 (GS101)

Girl Scouting 101 (GS101): This online, interactive piece will provide you with information about the basics of Girl Scouts:

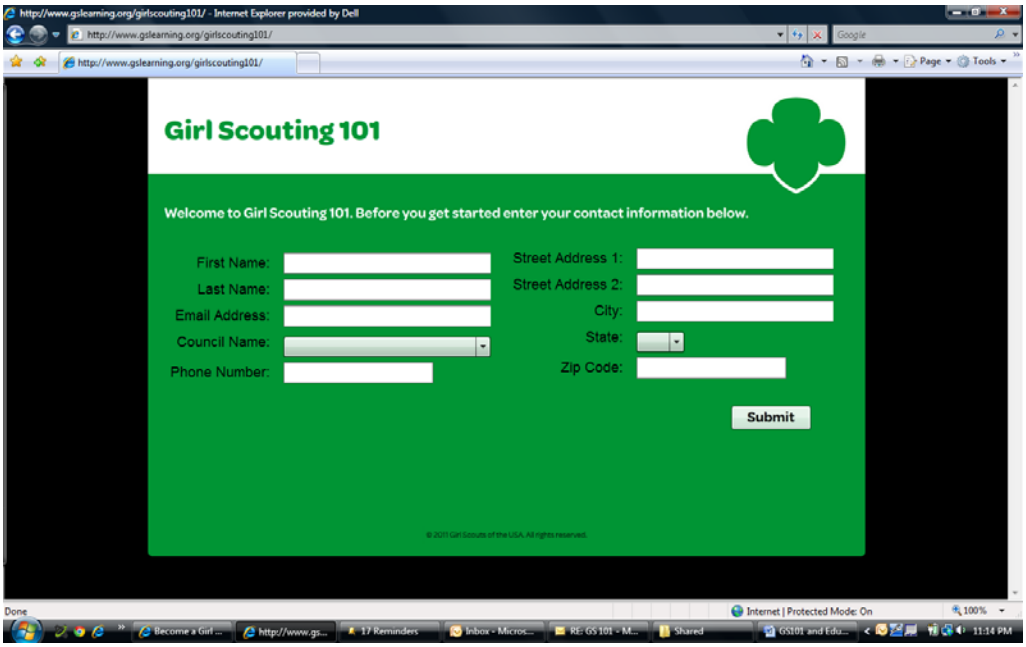
- ✓ The history and mission of the movement
- ✓ The Girl Scout Promise and Law
- ✓ Program keys and processes
- ✓ Girl Scout cookies
- ✓ Staying Safe (the Girl Scouts Safety Standards)
- ✓ Ages and Stages: What Girl Scouts are like
- ✓ Girl Scouts of the USA resources and support

To begin your online training, please complete the following steps:

a. Go to http://training.girlscouts.org/default.asp.

b. Select Girl Scouting 101

c. Enter password: aboutGS101



d. Enter contact information and select "Heart of Michigan" as your Council Name

e. Click the submit button

If you are unable to access this site or have questions, let your area manager or membership specialist know so this orientation can be shared with you in another format; or contact the adult recruitment and education specialist at your regional center.

Revised 01/05/2012 – mr

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New Volunteer Interest Form

Date: _____

First Name: _____ Last Name: _____

Address: _____ Apt.: _____

City: _____ State: ____ Zip: _____

Home phone: _____-_____-_____ Mobile phone: _____-_____-_____

E-mail: _____

Best time to reach you? ☐ Morning ☐ Afternoon ☐Evening

How do you prefer to be contacted by us? ☐ Home phone ☐ Mobile phone ☐ E-mail

Preferred volunteer service: *(Select all opportunities that you are interested in)*

☐ **Working directly with girls**

Grade Level:

☐ Grades K–1 ☐ Grades 2–3 ☐ Grades 4–5 ☐ Grades 6–8 ☐ Grades 9–10 ☐ Grades 11–12

Which program opportunities are you interested in hearing more about?

☐ Camp/Outdoor ☐ Classic Troops ☐ Events ☐Series ☐ Travel ☐ Virtual (Online) ☐ Unsure

☐ **Supporting adults who work directly with girls**

☐ Accounting/Data Entry
☐ Communications/PR
☐ Community Cultivation/ Fundraising
☐ Customer service/Retail
☐ Event Coordination
☐ General Office Work
☐ Learning Facilitation/Training
☐ Product sales
☐ Recruiting
☐ Research/Evaluation
☐ Trip Planning
☐ Volunteer Mentoring

☐ Other *(Please specify)*: _____

Volunteer availability: *(Please select all that apply)*

Day(s): ☐ Mondays ☐ Tuesdays ☐ Wednesdays ☐ Thursdays ☐ Fridays ☐ Saturdays ☐ Sundays

Time(s) of day: ☐ AM ☐ PM

At what location would you prefer to volunteer (school, city or camp)? _____

Ideal volunteering duration: *(Check all that apply)*

☐ Ongoing ☐ Short-Term ☐ One-Time ☐ Seasonal

This is a two-page form. Please complete both pages.

Skills and Interests

Please indicate your specialized skills, talents, and interests:

- ☐ Accounting
- ☐ Arts & Crafts
- ☐ Bicycling
- ☐ Boating
- ☐ Camping
- ☐ Dancing
- ☐ Dramatics
- ☐ Gymnastics
- ☐ Hiking
- ☐ Literature
- ☐ Music
- ☐ Outdoor Activities
- ☐ Photography
- ☐ Science
- ☐ Technology
- ☐ Sports
- ☐ Swimming
- ☐ Water Sports

☐ Other *(Please specify)*: _____

What languages other than English do you speak and understand proficiently? _____

Girl Scout History

Have you previously volunteered for Girl Scouts? ☐Yes ☐No Where? _____

Were you a Girl Scout as a girl? ☐Yes ☐No Where? _____

Background

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

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

Are you or one of your family members listed on the sex offender's list? ☐Yes ☐No

Please explain any "yes" responses below (A conviction record will not necessarily be cause for disqualification):

_____

_____

_____

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.

First Name _____ Last Name _____

Ph (____) _____ - _____ Email_____

First Name _____ Last Name _____

Ph (____) _____ - _____ Email_____

First Name _____ Last Name _____

Ph (____) _____ - _____ Email_____

Internal use only:

Area:_____ Processed By:_____

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Background Check Authorization

I understand that Girl Scouts Heart of Michigan considers it vital to safeguard the girls they serve and part of that process includes doing a background check prior to appointing volunteers. I understand that the information I have provided may be verified by contacting persons or organizations listed in the application, or by contacting any person or organization that may have information concerning me.

I hereby consent and voluntarily authorize Girl Scouts Heart of Michigan to obtain an independent criminal background report. I certify that the entries made by me in this form are true, complete, and accurate to the best of my knowledge, and are made in good faith and voluntarily. I understand that any false statements or answers by me may disqualify me for volunteer services or will be sufficient grounds for termination. Moreover, I understand that failure to complete this form will preclude me from volunteer opportunities with the Girl Scouts Heart of Michigan.

I further understand that I will receive a complete and accurate disclosure of the nature and scope of the background verification, in the event such investigation negatively affects my placement as a volunteer.

Signature _____ Date _____

Print Full Name (First/Middle/Last)_____

Maiden/Other names used_____

**Race White___ Black___ Asian/Pacific Islander__ Am Indian/Alaskan Native__ Other ___

Date of Birth _____/_____/_____ Daytime contact # _(_____)_____-_____

Address _____ City _____

State _____ Zip _____ E-mail _____

Driver's License Number _____

****In the selection of volunteers, there shall be no discrimination against an otherwise qualified individual on the basis of race, color, ethnicity, sex, religion, creed, national origin, socioeconomic status, age, disability, marital status, veteran status, or on any other basis prohibited by federal, state, or local law.**

Office Use Only

Area: _____ Membership Specialist: _____

Date Criminal Background Check Screening Performed _____

__ Staff notified __ Recorded in Personify

Area administrative volunteer to be contacted regarding status of background check

Name _____ GS Title _____

E-Mail _____ Phone _____

Please indicate in which city/school/troop you wish to volunteer:

_____

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Girl Scouts Heart of Michigan

Confidential Reference Form for Adults Working with Girls

The individual listed below has applied for a volunteer position with Girl Scouts Heart of Michigan and has provided your name as a reference. We cannot place a volunteer until we receive references. We appreciate your willingness to provide one. Please complete the form below and return it to the address checked at the bottom of the page. If you have any further information you would like to share, feel free to add comments. Thank you.

Applicant's Name: _____

Position Applied For: _____

Reference Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Relationship to Applicant: _____

In what capacity have you seen this person in a situation where she/he has related to children?

_____

_____

Please rate the applicant on the following, based on a scale of:

A = Always *S = Sometimes* *N = Never* *U = Unsure*

_____ Tolerant _____ Flexible _____ Honest _____ Positive

_____ Dependable _____ Expresses ideas clearly and concisely

_____ Understands and embraces differences in people

Would you recommend the candidate to be in a situation where this adult was leading a group of girls in a Girl Scout activity? Why or why not?

_____

_____

_____

Please continue on back

Signature of reference: _____

☐ Ann Arbor Regional Center
1900 Manchester Rd
Ann Arbor, MI 48104
Fax: 734-971-2160

☐ Calhoun County Regional Center
18935 15½ Mile Rd
Marshall, MI 49068
Fax: 269-781-8726

☐ Jackson Regional Center
4403 Francis St
Jackson, MI 49203
Fax: 517-784-9553

☐ Kalamazoo Regional Center
601 W Maple Rd
Kalamazoo, MI 49008
Fax: 269-492-1439

☐ Lansing Regional Center
1223 Turner Street
Lansing, MI 48906
Fax: 517-699-9405

☐ Saginaw Regional Center
5470 Davis Rd
Saginaw, MI 48604
Fax: 989-799-1450

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