



**GIRLS INC. VOLUNTEER APPLICATION**

First Name ..... Last Name .....  
Address ..... City/State/Zip.....  
Telephone..... Cell phone .....  
Email.....

**In an emergency, notify:**

Name ..... Phone number .....

Have you ever been arrested or convicted of a felony? (please circle correct response): Yes No

Current Employer/School.....

List previous volunteer experience .....  
.....  
.....

Volunteer Availability: Mon. .... Tues..... Wed.....  
(Please list times available) Thurs. .... Fri. .... Sat. ....

Number of Days per week (please circle applicable): 1 2 3 4 5

Comfortable working with children (please circle applicable): ages 6-9 ages 10-14 ages 15-18

Print Name.....

Signature ..... Date .....

## GIRLS INC. VOLUNTEER GUIDELINES

We expect that you will view yourself as a representative of Girls Inc, and as such, we ask that you carefully read through and abide by the following guidelines to ensure you will have the most meaningful and worthwhile volunteer experience possible.

1. Girls Inc is dedicated to providing a safe and happy environment to our girls. We are very professional and respectful of the privacy of our children and their families.
2. Always use a soft, friendly voice.
3. Please remember to focus on the girls and save adult conversations for later.
4. If a girl indicated to you that they feel ill, bring them to an adult staff member. Always make sure the instructor/employee that the girl is with knows what you are doing.
5. It is imperative that you avoid any body-conscious comments. Praise girls on their achievements and attitudes, not physical attributes.
6. Please refrain from any physical contact. You should never touch a girl. Never pick them up to carry them or have them sit on your lap.
7. You should not let a girl leave the building without checking with the staff. Girls must be signed out.
8. Positive reinforcement, direct and sincere assurance of girls' efforts is an expectation of all volunteers.
9. Refer to participants as "girls" or "young women" rather than "ladies". "Ladies" sometimes implies limitations on what girls can do.
10. Volunteers are required to sign in and out each day they volunteer in the volunteer log located in the lead office.
11. Please notify the lead office promptly if you cannot make it on your scheduled day.
12. We appreciate your help. Please remember that as a volunteer for Girls Inc. you represent our organization and should exemplify Strong, Smart, and Bold qualities through your interactions with our girls!

Print Name.....

Signature ..... Date .....

**Background Check Release and Authorization Form**

I hereby authorize Girls Inc of Southwestern CT to conduct a state criminal record search, as applicable, through law enforcement agencies, the FBI, courts, and other records resources. Information of a confidential and privileged nature is included in this authorization. I also understand that a conviction of a crime against a person or property may negatively impact or prevent me from obtaining a volunteer position with Girls Inc. Failure to comply with the request for authorization to conduct a criminal record history check will disqualify me from volunteer service with Girls Inc.

I certify that the information I have provided on this form is complete and truthful. I understand that providing misleading or false information or failing to disclose convictions will be basis for disqualification from further consideration for volunteer service with the Organization. I understand that if I am appointed to a volunteer position, I must inform Girls Inc of Southwestern CT if I am subsequently convicted of any criminal offense during my appointment or affiliation with the Organization and its programs.

Print Name..... Date of Birth: .....

Signature ..... Date .....