

Screened \_\_\_\_\_  
Background Check \_\_\_\_\_  
Training \_\_\_\_\_



Date Placed \_\_\_\_\_  
Site \_\_\_\_\_  
Days/Times \_\_\_\_\_

**BOYS & GIRLS CLUBS**  
OF BELLEVUE  
*Volunteer Application*

\_\_\_\_\_  
Name Gender Date of Birth

\_\_\_\_\_  
Address City, State Zip Code

\_\_\_\_\_  
Phone Number (home and cell) E-mail Address

\_\_\_\_\_  
Present Employer Present Employer's Address

\_\_\_\_\_  
School Year in School ( )  
Please check if over 16

**Emergency Contact**

\_\_\_\_\_  
Name Phone Number Relationship

**References:** Please list three personal references (other than relatives) that you have known for over three years.

Name	Home Phone	Work Phone	Relationship

Relevant employment history: \_\_\_\_\_  
\_\_\_\_\_

Previous volunteer experience: \_\_\_\_\_  
\_\_\_\_\_

Reasons for volunteering (No Court Ordered Volunteers Please):  
\_\_\_\_ School \_\_\_\_ Work \_\_\_\_ Court ordered \_\_\_\_ Other (please explain): \_\_\_\_\_

Have you volunteered with us before? \_\_\_\_\_ If so, when and which site? \_\_\_\_\_

Hobbies/Interests: \_\_\_\_\_  
\_\_\_\_\_

Tell us about things you'd enjoy doing with the kids i.e. special skills, interests and hobbies you could share with our members.  
\_\_\_\_\_  
\_\_\_\_\_

Fluent in Other Languages (Specify): \_\_\_\_\_

How did you learn about volunteer opportunities for the Bellevue Boys and Girls Clubs?  
\_\_\_\_ Newspaper \_\_\_\_ Flyer \_\_\_\_ Friend \_\_\_\_ Presentation \_\_\_\_ United Way \_\_\_\_ Other (please explain) \_\_\_\_\_

**AVAILABILITY**

*Please fill in specific times you are available to volunteer*  
Our program hours are from 2:30-6:30 MTThF and 12-6:30 W

	Monday	Tuesday	Wednesday	Thursday	Friday
From					
To					

How many hours a week would you like to volunteer? \_\_\_\_\_

How long of a commitment are you willing to make? \_\_\_\_\_

**PREFERENCES**

**AGE:**                      **Elementary**                      **Middle School**                      **High School**  
(Please Circle)      K 1 2 3 4 5                      6 7 8                      9 10 11 12

**Location:**

(Please circle top 3)

**Lake Hills Elementary**  
14310 SE 12th St

**Main Club**  
209 100th Ave NE

**Ground Zero Teen Center**  
257 100th Ave NE

**Eastside Terrace**  
704 147th PI NE

**Bellewood Elementary**  
301 151st Place NE

**Bennett Elementary**  
17900 NE 16th

**Phantom Lake Elementary**  
1050 160th Ave SE

**Stevenson Elementary**  
14220 NE 8th St

**South Bellevue Community Center**  
14509 SE Newport Way

**Crossroads Community Center**  
16000 NE 10th St

**Teen Excellence Center**  
15230 Lake Hills Blvd

All volunteers must complete for submittal the Washington State Patrol Criminal History Report. Volunteer acceptance is subject to WSP. The information on this application will assist us in matching your skills/interests with Club needs. All personal information will be kept confidential.

*I authorize investigation of all statements contained in this application. I understand that misrepresentation or omission of facts called for is cause for dismissal. If accepted as a volunteer, I agree to abide by the policies and standards of the Boys and Girls Clubs of Bellevue, fulfill training requirements and volunteer responsibilities to the best of my ability. If for any reason, I find that I am unable to carry out my volunteer responsibilities, I will notify my supervisor.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please return to:**

Boys and Girls Clubs of Bellevue \* 209 100th Ave NE, Bellevue, WA 98004 \* Phone (425) 454-6162 \* Fax (425) 637-6509