



## TWENTY-FIRST CENTURY SCHOLARS PROGRAM VOLUNTEER APPLICATION

Thank you for completing this form and the attached background check. This information will help us to find the most satisfying and appropriate volunteer service for you.

Please print and fill out all the information requested.

**GENERAL INFORMATION**

Date: \_\_\_\_\_

Name: \_\_\_\_\_ D/O/B: \_\_\_\_/\_\_\_\_/\_\_\_\_  
*First Middle Last*

Home Address: \_\_\_\_\_  
*Street City State/Zip*

Day Telephone: \_\_\_\_\_ Night Telephone: \_\_\_\_\_

Cell Phone (optional): \_\_\_\_\_ E-mail: \_\_\_\_\_

Age (*circle the appropriate age range*):

- 18 – 25      41 – 50
- 25 – 30      51 – 60
- 31 – 40      61 and older

Education (*circle the last completed*):

- 8th Grade      Associate's degree
- High School      Bachelor's degree
- Technical degree      Graduate degree

Have you been convicted of a crime other than a minor traffic offense? Yes \_\_\_\_\_ No \_\_\_\_\_

**EMPLOYMENT INFORMATION**

Are you presently employed? Yes \_\_\_\_\_ No \_\_\_\_\_ If no, proceed to Volunteer Information

Can Scholars shadow you at your job? Yes \_\_\_\_\_ No \_\_\_\_\_

Current Employer:

\_\_\_\_\_  
*Organization Address*

\_\_\_\_\_  
*Contact Name Phone Fax*

\_\_\_\_\_  
*Hours worked Responsibilities/Job Title*

**VOLUNTEER INFORMATION**

In what kinds of volunteer positions are you most interested?

(*Rank in order of preference, with 1 being most interested and 10 being least interested*)

- |                                       |                           |
|---------------------------------------|---------------------------|
| Tutoring _____                        | Speakers bureau _____     |
| Mentoring _____                       | Event chaperone _____     |
| Administrative/office support _____   | Activity supervisor _____ |
| Other ( <i>please specify</i> ) _____ | _____                     |

Previous Volunteer Position:

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<i>Organization Name</i>	<i>Address</i>	
<i>Contact Name</i>	<i>Phone</i>	<i>Fax</i>
<i>Days/Hours Worked</i>	<i>Responsibilities</i>	

How did you find out about the Twenty-first Century Scholars Program? (*Check all that apply*)

Scholar in the family	___	Radio	___
Friend/family member	___	Employer	___
Newspaper article	___	Postcard	___
Newsletter	___	Other	_____

**REFERENCES**

Please list at least one professional or volunteer reference.

1. \_\_\_\_\_  
*Name/Organization* *Relationship*

\_\_\_\_\_ *Address* *Telephone*

2. \_\_\_\_\_  
*Name/Organization* *Relationship*

\_\_\_\_\_ *Address* *Telephone*

3. \_\_\_\_\_  
*Name/Organization* *Relationship*

\_\_\_\_\_ *Address* *Telephone*

**AUTHORIZATION**

I hereby authorize the Twenty-first Century Scholars Program to contact my references and conduct an annual criminal history background check. I understand that information collected during this background check will be used to determine my suitability for particular types of volunteer work and that all such information will be kept strictly confidential.

Social Security Number: \_\_\_\_\_ Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_

Photo ID provided (a copy must be attached to application:) \_\_\_\_\_

\_\_\_\_\_  
*Volunteer Signature* *Date*

Reviewed and approved by \_\_\_\_\_  
*Regional Coordinator* *Date*