



## Campus Volunteer Application

The suggested donation of \$100 helps cover the costs of background check, application processing, annual tuberculosis testing, and other costs related to the volunteer program.

Personal information		
Last name	First name	Date of application
Date of birth	Social security number	California drivers license number
Employer		Referred by (if applicable)

Highest level of education

High school   
  Undergraduate degree   
  Graduate degree   
  Post-graduate degree

Contact information			
Street	City	State	Zip
Email	Daytime phone	Evening phone	

Emergency contact		
Name	Phone	Relationship

References		
Name	Phone	Relationship
Name	Phone	Relationship
Name	Phone	Relationship

What experience do you have serving children and families?

What commitments are you interested in making (i.e. how often and for how long)?

What skills, talents, abilities, or gifts do you wish to contribute?

What ages or programs are you most interested in serving?

### **Volunteer Agreement**

I understand Casa Pacifica Centers for Children and Families values the role of volunteers in the lives of children and families and desires to maximize the impact of positive relationships with the community. I support the mission and will model the values of respect, integrity, courage, and compassion. I will maintain professional behavior, hygiene, and dress while serving as a volunteer.

I am physically and mentally capable of performing the essential requirements of a volunteer. If reasonable accommodations are required or there is something I do not wish to participate in, I will discuss my concern with the volunteer coordinator. I will notify the volunteer coordinator if I contract any communicable illness (such as hepatitis, tetanus, measles, etc.) I am willing to submit an annual test for tuberculosis if my application is accepted.

I have never been convicted of a misdemeanor or felony. I authorize those listed as references to release information regarding my work history and/or personal character. I understand a criminal record check may be made before this application is accepted. If I am convicted of a crime after my initial background clearance, I will notify the volunteer coordinator. I understand I may be required to submit to a physical and/or mental examination, substance abuse screening, and/or inspection of personal items brought with me to campus at any time.

I will keep the personal information I may learn about children and families confidential and respect their right to privacy. I will remain under the supervision of assigned staff and will never be alone with a child or youth while serving as a campus volunteer. Should a child or youth become escalated, I will remove myself and allow staff to support and intervene as appropriate.

I certify the information provided in this application is true and that any misrepresentation of facts will result in the termination of my status as a volunteer.

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Print name

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Signature

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Date