



Inspiring Youth, Building Healthy Communities
Serving Essex, Essex Junction and Westford Since 1986

Volunteer Application

Name: Date of Birth: Check one: Male Female
Street Address: City: State: Zip:
Home #: Cell #: Email:
Would you like to be added to the CHIPS email list? Yes No Thanks

How did you hear about volunteering at Essex CHIPS?

- Essex CHIPS website
Essex Reporter
Friend
United Way
School (please list)
Other

Are you volunteering to complete a community service requirement? Yes No
If yes, for: School Court ordered Other

Please check ALL that interest you/you are available for:

- Monday 2:30pm-5:30pm: Tween Center Volunteer - Age group: 4th-5th graders
Tuesday 2:30pm-5:30pm: Teen Center Volunteer - Age group: 6th-8th graders
Wednesday 2:30pm-5:30pm: Teen Center Volunteer - Age group: 6th-8th graders
Thursday 2:30pm-5:30pm: Teen Center Volunteer - Age group: 6th-8th graders

Please list any groups that you have been involved with and/or volunteer services that you perform(ed) recently:

Are you currently employed? If so, where?
(List your school information if you are a college student)

Employer Business address: Employer Business phone:

What would you consider your lifetime occupation(s)?

What interests or hobbies do you have that you would like to share?

What experience do you have working with youth?

Do you give Essex CHIPS permission to use your name and/or photograph in promotional materials?

- Yes No



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Please list the names of three references that are not related to you, but can comment on your work ethic and/or ability to interact with youth.

- 1) Name: Relationship: Primary Phone: Length of time known: Email:
2) Name: Relationship: Primary Phone: Length of time known: Email:
3) Name: Relationship: Primary Phone: Length of time known: Email:

Have you ever been convicted of or do you have any pending violations of law (any felony or misdemeanor classified as an offense against a person or family, public indecency or a violation involving a state or federally controlled substance) other than minor traffic violations? Yes No

If yes, please explain:

Blank lines for explanation of convictions or pending violations.

I, the undersigned, certify that all information provided on this application is accurate to the best of my knowledge. I understand that any misrepresentation on this statement will result in immediate disqualification for any volunteer service with Essex CHIPS. I understand that Essex CHIPS will verify the information I have provided above.

I give permission for Essex CHIPS staff to run a background check as part of the screening for entrance into this program. This may include verification of personal and employment references as well as a criminal check with local authorities. I am also willing to complete a criminal records check for conviction(s) and pending charges.

I understand that receipt of my application does not guarantee acceptance into the program. Our decision to accept is based on several factors, including applications, references, and assessment of suitability during the information sessions. I hereby release Essex CHIPS, their Boards, and agents, as well as all providers of information, from any liability related to furnishing and receiving information related to arrests and convictions. Should any information in this application change, I agree to notify Essex CHIPS in writing within 30 days.

Signature of Applicant: Date: