

PLEASE PRINT OR TYPE ALL
INFORMATION REQUESTED
EXCEPT SIGNATURE

**HENLEY-YOUNG
JUVENILE JUSTICE CENTER**

Volunteer No. _____
Approved _____
Disapproved _____
By: _____

APPLICATION FOR VOLUNTEERS
APPLICANTS MAY BE TESTED FOR ILLEGAL DRUGS

Referred By: _____ Date _____

Name _____
Last First Middle Maiden

Present address _____
Number Street City State Zip

How long? _____ Social Security No. _____ - _____ - _____

Telephone (____) _____

Date of Birth _____

Position applied for (1) _____ Days/hours available to volunteer
(Interest in juveniles) _____
No Pref _____ Thur _____
Mon _____ Fri _____
Tue _____ Sat _____
Wed _____ Sun _____

How many hours can you volunteer? _____ Can you work nights? _____

Time desired weekly monthly occasionally (Holidays)

When available for work? _____ List skills _____

TYPE OF SCHOOL	NAME OF SCHOOL	LOCATION (Complete mailing address)	NUMBER OF YEARS COMPLETED	MAJOR & DEGREE
High School				
College				
Bus. or Trade School				
Professional School				

HAVE YOU EVER BEEN CONVICTED OF A CRIME? No Yes

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), how recently such offense(s) was/were committed, sentence(s) imposed, and type(s) of rehabilitation. _____

PLEASE READ CAREFULLY

APPLICATION/CONFIDENTIALITY FORM WAIVER

In exchange for the consideration of my application by _____ (hereinafter called "Henley-Young Juvenile Justice Center"), I agree that:

Neither the acceptance of this application nor the subsequent entry into any type of volunteer relationship, either in the position applied for or any other position, and regardless of the contents of volunteer handbooks, policy statements, and the like as they may exist from time to time, or other Center practices, shall serve to create an actual or implied contract of employment, or to confer any right to remain a volunteer of the Center, or otherwise to change in any respect the volunteer-at-will relationship between it and the undersigned, and that relationship cannot be altered except by a written instrument signed by the Judge/Director of the Center. Both the undersigned and _____ may end the volunteer relationship at any time, without specified notice or reason.

I authorize investigation of all statements contained in this application. I understand that the misrepresentation or omission of facts called for is cause for dismissal at any time without any previous notice. I hereby give the Center permission to contact schools, previous employers (unless otherwise indicated), references, and others, and hereby release the Center from any liability as a result of such contract.

I understand that, in connection with the routine processing of your volunteer application, the Center may request character, general reputation, personal characteristics, and criminal background checks. Upon written request from me, the Center will provide me with additional information concerning the nature and scope of any such report requested by it.

I further understand that upon approval to volunteer at the Henley-Young Juvenile Justice Center, will obligate me to **CONFIDENTIALITY** concerning **any** information pertaining to **any** juvenile offender, whom I may come in contact with here at the Center. Consent to and compliance with such policy is a condition of my volunteering.

Signature of applicant _____

Date: _____

This Center is an equal employment opportunity employer. We adhere to a policy of making employment decisions without regard to race, color, religion, sex, sexual orientation, national origin, citizenship, age, or disability. We assure you that your opportunity for employment with this Center depends solely on your qualifications.

Thank you for completing this application form and for your interest in our Center.