LĀNA'I YOUTH CENTER

717 Fraser Avenue Lana'i City, Hawaii 96763 Office: (808) 565-7675 Fax: (808) 565-9588 E-mail: lyc@lanaiyc.org

VOLUNTEER APPLICATION INSTRUCTIONS

SCREENING & CRIMINAL BACKGROUND CHECK POLICY:

• It is the policy of the Lanai Youth Center to conduct a criminal background check and child abuse clearance for all <u>adult</u> volunteers.

PROCEDURES:

- Sign a volunteer application, answer all questions and fill out information requested in sections 1, 2 (if applicable), 3 and 4.
- Hawaii criminal checks will be obtained from the Hawaii State Judiciary.
- National criminal checks must be obtained for volunteers who have lived in Hawaii for less than 10 years.
- If an adult is helping with driving the youth to and from events It is the responsibility of the volunteer to obtain a traffic abstract at his/her own expense.

VOLUNTEER VERIFICATION DOCUMENTS REQUIRED:

- Drivers License or Passport
- Social Security Number or Birth Certificate
- Traffic Abstract (if driving LYC van & youth to and from outings).

FORMS USED:

• Volunteer Application

Mahalo for Applying!

We look forward to working with you and appreciate the generous offer of your time and skills.

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	For Office Use Only	
Initial		Date
	Processing Fee Collected	
	References Completed	
	Vol. Policy Completed	
	National Check Sent	

VOLUNTEER APPLICATION

1) Contact, Personal & Work Information:

Name	First			Othernemes
	FIrst	MI	Last	Other names
Address				
(If different from	above, Please list ad	dresses for last 5 years	s on a separate shee	t of paper & attach.)
Phone		E-mail		
Social Security #	Birth	iday Age	Marital S	tatus
Spouse name	Ch	ildren's Names		
Employer Name:				
Job Title				
Address				
Phone		_ E-mail		
Type of business or orga	anization			
Primary service(s) and a	rea/population se	erved		
Preferred method of co	ntact: ()Work	() Residence	() SMS Text	
2) Are you willing to dr	ive youth to & fro	om outings? Yes	No	
(If you answered no pleas	se skip this portion)	1		
Do you have a valid Hav	vaii Driver's Licens	e? Drivers L	icense No	
Do you have use of a ca	r? Yes or No _	is this car insure	ed? Yes No _	
Name of Insurance Com	ipany:			
Have you ever had your	driver's license re			

Please attach a copy of your drivers abstract to this application.

3) Community Service, Education, Experience & Skills History:

Please list boards, committees and other organizations you <u>currently</u> volunteer at or have volunteered for (school, business, civic, community, fraternal, political, professional, recreational, religious, social).

Organization	Role/Title	Dates of Service		
Education Background/Training/Certificates/Diploma/Degree				
Any special training, sl	kills, or hobbies?			

Skills, Experience and Interests (Please check mark all that apply)

Administration, Management	Planning Expertise
Community Service	Personnel, Human Resources
Education, Instruction	Policy Development
Enthusiasm	Program Evaluation
Finance, Accounting Expertise	Public Relations
Fundraising	Social Media, Web Design
Grant Writing	Special Events
Leadership Capacity	Technology
Marketing and Communications	Willingness to Learn New Things
Nonprofit Experience	Other:
Outreach, Advocacy	Other:
Passion and Commitment	Other:

Please list any groups, organizations or businesses that you could serve as a liaison to or on behalf of the Lāna`i Youth Center.

How much time are you available to volunteer?	🗆 1 Hour	🗆 2 + hours
Can you commit to attending weekly or monthly?	\Box Weekly	Monthly
Can you make a commitment to volunteer for at-least one year?	Yes No	

4) Consent:

FOR ADULT VOLUNTEER

I understand that part of the process that leads to becoming a volunteer is the agency's background check procedures. This procedure includes background checks both locally and nationally at a cost of \$10.00, to help us defer the cost, are you able to pay for or make a donation to help cover the fee _____yes or _____no. If you are able to help, please include the payment with your form or make a check payable to The Lanai Youth Center.

I hereby authorize The Lanai Youth Center to check with the appropriate public authorities (police, courts, etc.) for matters of public record regarding my background or history.

I hereby release the addressed institution(s) and all individuals connected therewith from all liability for damage whatsoever incurred in furnishing such information.

I do _____ / I do not _____ give my consent and permission to take my picture or use my photograph and name for the purpose of volunteer recruitment, public relations and publicity efforts by The Lanai Youth Center to promote the program.

Signed ______ Date: ______

PARENTAL CONSENT FOR HIGH SCHOOL VOLUNTEER

I give my full permission and consent for my child to volunteer for The Lanai Youth Center. I give my permission and consent with the understanding that my child will volunteer to spend ______ hours each week at the Program site.

I do _____/ I do not _____ give my consent and permission to use my child's photograph and first name only for the purpose of volunteer recruitment, public relations and publicity efforts by The Lanai Youth Center to promote our program.

I give my consent for The Lanai Youth Center to contact my child's teacher and school to request information to best meet my child's needs.

Parent's Name (please print) ______

Parent Signature	Date:	