



SCIC-Volunteer Program

10175 Slater Avenue, #150, Fountain Valley, CA 92708

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Volunteer Application and Agreement Form

Last Name: _____ First Name: _____ Date: _____

*Name of Parent or

Guardian if under 18 years: _____

*If volunteer is under 18 years, the parent or guardian must also complete a volunteer application and agreement form.

Address: _____

Tele: _____(H); _____(W)

Cell: _____ Fax: _____

EMAIL: _____

Company or Volunteer Group Name: _____

Date of Birth: _____ Driver's License No. _____

Emergency

Contact: _____

(Name)

(Tele.No.; Indicate Home, Work or Cell)

(Relationship)

Do you have any friends/family members who are employed or volunteer here? ____Yes ____No

*If yes, please list their name(s): _____

When are you available to volunteer (specify hours of availability)?

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____

Saturday _____ Sunday _____ Holidays only _____

Types of volunteer work you think you'd be most comfortable with (check all that applies):

___ Helping with a group activity ___ Annual Pow Wow ___ SCIC outreach events

___ Working one on one ___ Holiday Toy Drive ___ Other: _____

___ Office work ___ Tutoring students

List Your Past Volunteer Experiences:

Organization: _____ Duties: _____ Mo/Yr. to Mo./Yr. _____

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Have you ever been adjudged civilly or criminally liable for abuse of an individual with disabilities?

No ___ Yes ___; Have you been convicted of a crime? No ___ Yes ___ If yes, please describe:

BACKGROUND CHECK: Southern California Indian Center, Inc. requires volunteers for more than one occasion (of volunteering) or will be working with individual consumers to undergo a background check. Criminal conviction does not necessarily bar an applicant from volunteering. The nature of the offense will be taken into consideration before a decision is made. There is no fee on the part of the volunteer for the background check. Screening must be completed before volunteers begin working with consumers.

_____ I agree to have a background check. _____ (*initial*)

REFERENCES: List two people, not related to you who have knowledge of your qualifications.

Name: _____ Mailing Address: _____

Tele. No.: _____

Name: _____ Mailing Address: _____

Tele. No.: _____

_____ I need the following accommodation(s) to work as a volunteer: _____

As a volunteer for Southern California Indian Center, Inc., I agree to abide by all applicable rules and regulations of the agency. I understand that I will receive no monetary benefits in return for my volunteer service and that SCIC may terminate this agreement at any time without prior notice for any reason. I hereby authorize SCIC to check my references and I understand that a criminal background check (to volunteer more than once) is required.

I certify that my answers on this application are true and complete and that I have not knowingly withheld any information that might, if disclosed, affect my application unfavorably. I understand that any misrepresentation or omission of facts on this application could be cause for rejection of this application or dismissal.

I understand that after I submit my application, it will be reviewed and my eligibility for volunteer work will be determined. If needed, I agree to a meet with the on-site manager to perform my volunteer role.

I hereby Release and Waive liability against Southern California Indian Center, Inc., a non-profit corporation, its directors, officers, employees and agents, its successors and assigns, for any injuries or illness that I myself or my dependent may suffer in connection with any volunteer work for SCIC. Further, I agree that Southern California Indian Center, Inc., is not liable for any damage to my property or my dependent's property resulting from volunteer work for SCIC. I agree that this release is as broad and inclusive as permitted by the laws of the State of California.

Volunteer Signature*: _____ **Date:** _____

**If volunteer is under 18 years, the parent or guardian must sign this application and agreement form.*

FOR SCIC USE ONLY:		
Received on: _____	Background clearance: Yes _____ No _____ N/A _____	
By: _____	Approved for volunteering by: _____	Date: _____