

"I HAVE A DREAM"[®] FOUNDATION OF EAST PALO ALTO
VOLUNTEER APPLICATION

Full Name:		<i>I prefer to be called:</i>				
Address:	City:	Zip Code:				
Home phone:	Cell phone:	Work phone:				
Email:	Fax:					
SS #:	Are you at least 14 years old?					
Are you legally entitled to work in the United States? (If selected, you will be required to present government-issued identification.)						
Ethnicity (optional):		Sex (optional):				
Emergency Contact name:		Relationship:				
Phone:						
Availability & Interests						
How did you hear about IHAD-EPA?						
How many hours per week would you like to volunteer?						
Please list the times and days you are available to volunteer:						
Times:	Monday	Tuesday	Wednesday	Thursday	Friday	Weekends
I would like to... (please check all that you are interested in applying for)						
<input type="checkbox"/> Be a Homework Buddy during the after school program Mon, Tues, and Thurs, 4:00-5:00						
<input type="checkbox"/> Assist teachers elective teachers during the after school program 5:00-6:00						
<input type="checkbox"/> Assist in the classroom during the day						
<input type="checkbox"/> Chaperone fieldtrips						
<input type="checkbox"/> Help plan events such as fundraisers, parent dinners, fieldtrips, and guest speakers						
<input type="checkbox"/> Make a financial contribution to either the scholarship or operating funds						
<input type="checkbox"/> Assist with office activities such as typing, filing, and data entry						
<input type="checkbox"/> Translate documents from English to Spanish						
Interests & Special skills:						
Have you ever been a teacher or childcare worker, or do you have any other experience working with children? If so, please provide a description:						
Are there other personal experiences you have had that would be particularly helpful in your volunteer work with IHAD-EPA?						
Do you speak Spanish? If so, please rate your ability.						
1 (limited)		2 (proficient)		3 (fluent)		
Please check below the type of youth you would be most interested in working with:						
<input type="checkbox"/> learning disability			<input type="checkbox"/> shy			

outgoing
 opposite gender
 at grade-level
 foster child
 emotional needs (was physically or sexually abused)
 high-risk behavior (drugs, alcohol, crime)

same gender
 above grade-level
 below grade-level
 no preference

If you have a specific Dreamer you'd like to work with, please list them here: _____

Related Experience

Education:

School <small>(incl. any present school)</small>	Dates attended	Degree/Diploma <small>(or expected date of graduation)</small>	Major <small>(if applicable)</small>
_____	_____	_____	_____
_____	_____	_____	_____

Work Experience:

Employer	Position	Dates (from-to)	Phone	Address
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Notable Volunteer Experience:

Organization	Dates (from-to)	Phone	Address
_____	_____	_____	_____
_____	_____	_____	_____

Do you currently hold any special certificates, licenses or registrations (CPR, First Aid, etc.)? Please list:

References

Please list two non-relatives as references who can comment on your work or volunteer experience (email and at least one phone number are required).

Reference 1

Name	Street Address	City	State	Zip
_____	_____	_____	_____	_____
Home phone	cell phone	work phone	fax	
_____	_____	_____	_____	
Email	Relationship to you			
_____	_____			

Reference 2

Name	Street Address	City	State	Zip
_____	_____	_____	_____	_____
Home phone	cell phone	work phone	fax	
_____	_____	_____	_____	
Email	Relationship to you			
_____	_____			

Other Background Information

Have you ever been convicted of a crime in the past 7 years which has not been annulled, expunged, or sealed by a court?

If yes, please state the violation, location (city and state) and date of the incident. Do not include any conviction of marijuana-related offenses that are more than two years old. Note: convictions are not an automatic bar to volunteering.

Have you ever been the subject of child abuse investigation? If yes, please explain in detail the nature of the investigation, including the date and place of incident and the outcome of the investigation.

Releases and Signature

I understand that this application is not an offer of employment and that volunteering for Building Futures Now "I Have a Dream"® Foundation of East Palo Alto (IHAD – EPA) will not convey employment rights. As a volunteer, I agree to abide by the policies of Building Futures Now (IHAD – EPA) and I certify that the above information is correct. I recognize that my participation in a youth program depends on the satisfactory completion of a background check.

I hereby authorize Building Futures Now (IHAD – EPA) and its agents to investigate my prior employment, educational background, criminal record and where applicable to volunteering, driving record. I hereby authorize an investigation of all statements contained in this application and hereby authorize previous employers, personal references, or any other person or persons to whom Building Futures Now (IHAD – EPA) and its agents may refer to give any and all information regarding my employment, scholastic standing, or criminal and/or driving record(s). I understand that this information will be treated as confidential material.

I release Building Futures Now (IHAD- EPA) and its agents from any and all liability, claims or lawsuits relating to Building Futures Now's (IHAD – EPA's) investigation and/or use of the information obtained from any and all of the above-referenced sources. I agree to defend, indemnify and hold harmless Building Futures Now (IHAD-EPA) from any and all claims or lawsuits which may result from Building Futures Now (IHAD – EPA's) investigation or actions taken as a result of its investigation.

Print Name: _____

Signature: _____

Date: _____

PLEASE RETURN THIS SIGNED APPLICATION WITH ALL OTHER MATERIALS TO:
IHAD-EPA • STANFORD NEW SCHOOL • 2033 PULGAS AVE
EAST PALO ALTO • CA • 94303