



Volunteer Application

Personal Data

First Name	Middle Name	Last Name	Email	
Physical Address		City	State	Zip Code
Mailing Address		City	State	Zip Code
Home Phone		Cell Phone	Work Phone	
Preferred Method of Contact				

Current Occupation _____ Current Employer (Company Name or Self Employed) _____

Are you already a Girl Scout member? YES NO If yes, how long have you been involved? _____

What volunteer role(s)/position(s) did you hold?

Availability and Interest

The organization offers volunteers six pathways to participate in Girl Scouting: **Camp, Events, Series, Troop, Travel, and Virtual.**

Briefly explain your interest in volunteering for Girl Scouts of Alaska:

Position Desired _____

School or Geographic Preference _____

What is your Volunteer Availability? Check all that apply

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning
<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon
<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening
<input type="checkbox"/> Specific # of weeks: _____		<input type="checkbox"/> 4-6 months	<input type="checkbox"/> A year	<input type="checkbox"/> Longer than a year	<input type="checkbox"/> Occasionally	
Do you prefer to work directly with:		<input type="checkbox"/> Girls	<input type="checkbox"/> Adults	<input type="checkbox"/> Both		

What Program opportunities are you interested in hearing more about? Camp Events Series Troop Travel Virtual (online)
(Circle all that apply)

If you wish to work directly with girls, what age level(s) do you prefer?

<input type="checkbox"/> Girl Scout Daisy (K-1st grade)	<input type="checkbox"/> Girl Scout Cadette (6th-8th grade)
<input type="checkbox"/> Girl Scout Brownie (2nd-3rd grade)	<input type="checkbox"/> Girl Scout Senior/Ambassador (9th-12th grade)
<input type="checkbox"/> Girl Scout Junior (4th-5th grade)	<input type="checkbox"/> No Preference

For Office Use Only										
Pathway: Troop	Event	Series	Travel	Camp	Program Level: D	B	J	C	S	A
App. Received _____	Background Chk Completed. _____	Interview Completed _____	SU/Area _____	Troop # _____						

What Indirect service (not working directly with girls but supporting adults who work directly with girls) are you interested in?

- | | | |
|--|--|--|
| <input type="checkbox"/> Trip Planning | <input type="checkbox"/> Recruiting | <input type="checkbox"/> Accounting |
| <input type="checkbox"/> Event Coordination | <input type="checkbox"/> Product Sales | <input type="checkbox"/> Learning facilitation |
| <input type="checkbox"/> Customer Service | <input type="checkbox"/> Interviewing | <input type="checkbox"/> Communications |
| <input type="checkbox"/> Volunteer Mentoring | <input type="checkbox"/> Community Cultivation | <input type="checkbox"/> Other: _____ |

References

Relevant Experiences (business, church, club, school, personal, etc.)

Name	Phone Number	Email
1.		
2.		
3		

Volunteer Disclosure, Background Check Authorization and Consent for Release of Information

I understand that:

In applying for a volunteer position, the information which I have furnished on this form is subject to verification, which may include contacting listed references and criminal history report. I understand that misrepresentation of omission of facts requested is cause for non-appointment as a volunteer.

I hereby consent and voluntarily authorize Girl Scouts of Alaska to contact listed references and to obtain an independent criminal background report that includes Social Security Number validation report. I further authorize said council to request or receive information including motor vehicle reports, past employment and/or references pertinent to my potential work as a volunteer. I further understand that a credit report may be requested if my assignment includes the handling of money.

I understand that the background check requires my full name, date of birth, Social Security Number, and either mailing address of email address. I also understand that once the background check is completed my personal information will be destroyed. I further understand that I will receive a complete and accurate disclosure of the nature and scope of the background verification, in the event such investigation negatively affects my placement as a volunteer.

I certify that the entries made by me in this form are true, complete, and accurate to the best of my knowledge, and are made in good faith and voluntarily. I understand that any false statements or answers by me may disqualify me for volunteer services or will be sufficient grounds for termination. Moreover, I understand that failure to complete this form will preclude me from volunteer opportunities with Girl Scouts of Alaska.

If appointed as a volunteer, I agree to abide by the philosophies, policies, and procedures as stated in Girl Scouts of Alaska Volunteer Policies and Volunteer Essentials, abide by the Girl Scout Promise and Law, to register with Girl Scouts of the USA and to fulfill the volunteer responsibilities to the best of my ability.

Girl Scout Promise

On my honor, I will try:
 To serve God and my country,
 To help people at all times,
 And to live by the Girl Scout Law.

Girl Scout Law

I will do my best to be:
 honest and fair,
 friendly and helpful,
 considerate and caring,
 courageous and strong, and
 responsible for what I say and do,
 and to
 respect myself and others,
 respect authority,
 use resources wisely,
 make the world a better place, and
 be a sister to every Girl Scout.

 Signature

 Date

This information will be destroyed after the background check has been completed. Please print clearly.

 Social Security Number (REQUIRED)

 Date of Birth (REQUIRED)