

Volunteer Services Application

Date:		
Personal Information		
First Name:	Last Name:	
Address:		
(Street)	(City)	(Zip Code)
Email Address:	Telephone #:	
Birthday: Month:	Day:	Year:
Personal or Professional Ref	erences (please exclude relatives)	:
1. Name:		
Address:		
Telephone #:	Relationship:	
2. Name:		
Address:		
Telephone #:	Relationship:	

Please indicate which of the following categories apply:

Service Learning	Court Order
	Offense:
School Service Hours	Other (Please describe):
Hours needed	_, by (date)
Work Experience: Current Occupation:	
If you are not currently employe	d, please tell us something about your work
experiences, hobbies, and inter	ests:

Please share with us your reason for volunteering (be specific):

Availability: Please be specific with times

	Mon	Tues	Weds	Thurs	Fri	Sat	Sun
Morning							
Afternoon							
Evening							

Areas of Interest: (Please circle all that apply)

Homework Helper	Front Desk/reception	Music	
Robotics	Outdoor Cleanup	Technology	Cafe
Athletics	Teens	Other	

The Boys & Girls Club of Greater Lowell relies heavily on the expertise of volunteers to help run specific programs and to bring a little extra attention to our kids. A background check will be completed on all applicants over the age of 18. Volunteer assignments are contingent on a successful completion of background check. Consistency with our members is a top priority. Please plan on a commitment of at least 32 hours.

I declare the above information is accurate and correct to the best of my knowledge. I authorize the Boys & Girls Club of Greater Lowell to make any inquiries to determine my suitability for volunteering.

Signature: _____ Date: _____

Please return completed Volunteer Services Application to the front desk.Boys & Girls Club of Greater Lowell• 657 Middlesex St.• Lowell, MA 01851• (978) 458-4526