



**BOYS & GIRLS CLUBS  
OF GREATER SANTA ROSA**

**VOLUNTEER/MENTORING APPLICATION**

*The mission of the Boys & Girls Clubs of Greater Santa Rosa is to inspire and empower all young people, especially those who need us most, to realize their full potential as productive, responsible and caring citizens.*

Date: \_\_\_\_\_ Club or Site: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle Initial

Address: \_\_\_\_\_  
Street City State Zip

Day Phone: \_\_\_\_\_ Eve. Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Are you a Youth Volunteer (17 and under)? \_\_\_\_\_ If yes, how old are you? \_\_\_\_\_

What is your educational background? \_\_\_\_\_ What is your occupation? \_\_\_\_\_

Do you have any limitations that will restrict your volunteering: \_\_\_\_\_ If yes, please explain: \_\_\_\_\_

Why do you want to volunteer here? \_\_\_\_\_

Do you have any past volunteer experience? \_\_\_\_\_ If yes, where?. \_\_\_\_\_

What skills or talents would you like to use? \_\_\_\_\_

What do you want to gain from your volunteer experience? \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**AVAILABILITY**

This section will help determine the best days and times you would like to volunteer. Please mark all days and times you would be available.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Time Frame Available						

**HOW MUCH TIME CAN YOU COMMIT TO?**

- One Time
- 2-3months
- 4-6 months
- 7-9 months
- 9 month – 1 year
- On Going

