



Volunteer Application

La Plata Youth Services

2490 Main Avenue, Durango, CO 81301

Phone: 970-385-4440 | Fax: 970-385-1726

Please include a **resume** and **driver's license**. If you will be transporting youth or staff, send **proof of vehicle insurance** with this application. Send the packet through the mail, or email to info@lpys.org If you email the packet, please write "volunteer application" in the subject line.

DIRECTIONS: Please fill out every cell, unless noted as "*optional*."

Contact Information

Name	
Preferred Pronouns	
Date of Birth	
Social Security #	
Street Address	
City ZIP Code	
Home Phone / Cell	
Employer and Work Phone	
Driver's License / ID #	
E-Mail Address	

Person to notify in case of emergency

Name	
Street Address	
City ZIP Code	
Home Phone / Cell	
Work Phone	

Please give us one personal and one professional reference

Name	
Street Address	
City ZIP Code	
Home Phone / Cell	
Work Phone	

Name	
Street Address	
City ZIP Code	
Home Phone / Cell	
Work Phone	

Volunteer Opportunities: Check all that interests you

- Office (Administrative)
- Events (Special Events)
- Unchain my heART, Youth Multi-Media Art Exhibit
- Animas Splash & Dash
- Youth Mentoring (Radical Possibilities program)
- Fundraising
- Board Membership
- Finance Committee
- Restorative Justice (Community Volunteers)
- Research

Availability

Our volunteer positions vary in time, duration, and level of commitment. Let us know when you are available during the week and how long you can commit to working at LPYS.

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Available Dates: _____

Duration/Commitment Range: _____

Interests and Motivation

We would like to know a little about you. Below, share with us your interests, hobbies and motivation so we can gain a better understanding of you and how you could best support the youth and staff at LPYS. Our Volunteer Coordinator will discuss options with you.

Experience and Motivation

Summarize any special skills or qualifications you may have, including informal, volunteer or paid experience working with youth and children. We are also interested in why you want to work with the youth at LPYS.

Criminal Background

Have you been convicted of a felony or differed sentence in this state or another? If so please describe the date, charge, city and state where charge occurred.

Have you ever been denied employment or been terminated from a job where you worked with minors? If so, please explain.

Authorization to Release Information

By signing this document, I am giving LPYS full authority to obtain and share background information related to the volunteer position, including but not limited to: police contacts, arrest records, criminal history, and Central Registry of Child Abuse Reports. I give my unconditional authorization for any and all persons or entities to release and any all information requested by LPYS. Information obtained from a consumer reporting agency will be used only for evaluation of suitability for volunteer applicants.

Furthermore, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

It is the policy of this organization to provide equal opportunities without regard to ethnicity, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form
and for your interest in supporting our programs
at La Plata Youth Services!

FOR STAFF USE ONLY

Background Check	Interview	Assignment
Date completed:	Completed by:	Assigned to:
Results:	Date:	Duration: