



Girl Scouts

Girl Scouts of Northern California
1310 S Bascom Avenue
San Jose, CA 95128
T (408) 287-4170 F (408) 287-8025
AdultScreening@GirlScoutsNorCal.org
www.GirlScoutsNorCal.org

Volunteer Application

Please check the type of job you are applying for:

☐ Leader ☐ Assistant/Co-Leader ☐ Volunteer

Don't delay! Please return this form by fax at (408) 287-8025
or by mail to the San Jose office.

Applicant Information:

Last Name First Name Middle Initial

Have you gone by any other names? ☐ Yes ☐ No

If yes, what other name(s)? _____

Address _____

City / State / Zip _____

Home Telephone Cell or Work Telephone

E-mail _____

Occupation / Employer _____

If working with a specific girl (daughter, niece, granddaughter, etc.) in Girl Scouts, please supply the following.

Girl's Last Name First Name

Leader's Name City Where Troop Meets Troop No.

For purposes of a background check, the following information is required:

Have you ever been convicted of a crime? *(A conviction will not necessarily be cause for disqualification.)* ☐ Yes ☐ No

If yes, please state the offense, location and date:

Is there a fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance and care of young people? *(A registered sex offender in the household is cause for automatic disqualification.)* ☐ Yes ☐ No

If yes, please explain.

Is there a fact or circumstance involving you or your background that would call into question your being entrusted with money or financial records?

If yes, please explain. ☐ Yes ☐ No

Have you received a moving violation in the last three (3) years? If yes, state the violation and date: ☐ Yes ☐ No

Are you willing to transport girls? ☐ Yes ☐ No

Drivers for Girl Scout activities must be at least 21 years of age, have a valid driver's license, carry the minimum insurance and have completed screening procedures for drivers established by the council. Under limited circumstances, drivers between the ages of 18 and 21 may receive a written exception to this requirement from the council and must comply with all conditions specified for such exception.

Driver's License Number _____

Auto Insurance Company and Policy Number _____

Three References *(Does not apply to Santa Clara County volunteers)*

Your references should be adults over 18 and not related to you who know your work and character. Please mail or give the self-mailer reference form to your references and have them mail them directly to the council office. Please list them here:

Reference Name Telephone

Reference Name Telephone

Reference Name Telephone

I certify that all the information on this application is true and complete.

I acknowledge that I have received and read a copy of GSNC Volunteer Management Policies and agree to abide by the policies. I understand that violation of any of the policies may result in termination of my volunteer services. I agree to release GSNC to use the application and reference information to evaluate my ability to conduct volunteer activities. I understand that falsification or significant omissions on the application may be justification for disallowing my participation with the Girl Scouts.

Signature Date

All information received in this application will be treated confidentially. However, GSNC may use any appropriate information from the application referencing process when refusing to allow a volunteer to work or when releasing a volunteer from a position involving fiscal responsibility or direct contact with girls.

Application Checklist

- ☐ Volunteer Application Form
- ☐ Reference Forms - to be sent separately by those completing the form (Does not apply to volunteers in Santa Clara County)

Return materials to: San Jose Office

OFFICE USE ONLY RECEIVED _____ APPROVED _____