

Girl Scouts, Tarheel Triad Council, Inc.
8818 W. Market Street, Colfax, North Carolina 27235
(336) 274-8491 (Greensboro)
1-800-672-2148 (WATS)
Fax: (336) 369-7476
www.tarheeltriad.org

OFFICE USE ONLY

Service Unit #

Troop #

VOLUNTEER APPLICATION

We consider all volunteer applicants regardless of race, color, religion, sex, national origin, age or disability.

PERSONAL INFORMATION

Name: _____ Social Security #: _____

Present Address: _____
Street City Zip

Telephone (Home): _____ (Cell): _____ (Email): _____

Previous Address:
(If less than 6 mos. at above): _____

Present Occupation *(if employed)*: _____ Employer: _____

Employer's street address: _____

May you be contacted at work? [] Yes [] No If yes, work phone number: _____

Where did you learn about volunteering with the Girl Scouts? _____

Please describe briefly why you are interested in volunteering with Girl Scouts, Tarheel Triad Council:

POSITION DESIRED

- List position(s) desired, numbered in order of preference: [] Leader [] Assistant Troop Leader
 [] Event Committee [] Administrative Volunteer [] Cookie Sale [] Girl Program Consultant
 [] General Office [] Fund-raising [] Data Entry [] Outdoor Program Resource
 [] Spanish speaker/translator [] Trainer [] Photography [] Public Relations [] Public Speaking

REFERENCES

List three (3) persons not related to you who can judge your qualifications for this position. If you have experience as a volunteer, one reference should be from that organization.

NAME	COMPLETE ADDRESS (Street, City, State, Zip)	TELEPHONE

(Over)

VOLUNTEER EXPERIENCE

List Girl Scout or other volunteer experience.

ORGANIZATION	SERVICE PROVIDED	DATES

TRAINING AND SKILLS

Indicate those most relevant to the position you desire first:

Course taken for subject or leadership development	Agency	Location	Dates

List current certifications: _____

Do you have a current NC Driver's License? [] Yes [] No CDL? [] Yes [] No

Driver's License #: _____

Have you ever been convicted of a crime? [] Yes [] No If yes, please state offense, date and location (A conviction record will not necessarily be cause for disqualification).

I certify that all information provided on this application is true and complete. I understand that falsification or significant omissions of any information may be considered justification for dismissal at a later date. I authorize Girl Scouts, Tarheel Triad Council, Inc., to contact the references provided to secure any and all information on my background and direct the holders of any and all such information to release it to the Girl Scouts, Tarheel Triad Council, Inc.

Signature: _____ Date: _____

FOR OFFICE USE ONLY:

Received By: _____

Reference #1 By: _____

Reference #2 By: _____

Reference #3 By: _____

CBC: _____ (date submitted) _____ (date completed)