

VOLUNTEER EXPERIENCE:

We would like to know if you have volunteered with other organizations, etc. Please fill out the info below. If you need to use additional pages feel free. Prior volunteer experience is not required to participate in this program.

Do you have volunteer experience? **YES** **NO**

If yes, where have you volunteered? _____

WORKING WITH CHILDREN:

Many of our programs deal with children and youth. When volunteering with our organization, many times you will be placed working with programs involving kids.

Please describe any experiences you have working with children. This can include babysitting, working with family members such as siblings or cousins, etc. A large portion of our programming involves assisting our instructors with classes and children's outreach programs. We would like to know if you are comfortable working with kids ages 3 and up. If you do not feel comfortable, please note this in the next question and we will work with assign you to different duties during your service.

Would you like to work with children? **YES** **NO**

If no, please skip the next question and we will do our best to assign you to different duties during your service.

Do you have experience working with children? **YES** **NO**

If yes, please describe your experience.

REFERENCE INFORMATION:

How did you learn about our organization? _____

Below please provide the names and contact information for three individuals, excluding relatives, for references:

1. Name: _____

Place of Employment: _____ Position: _____

Email: _____ Phone: _____

2. Name: _____

Place of Employment: _____ Position: _____

Email: _____ Phone: _____

3. Name: _____

Place of Employment: _____ Position: _____

Email: _____ Phone: _____

VOLUNTEER AVAILABILITY:

Please note your availability of volunteering. What times, dates, or days of the week OR events work best for you?

VOLUNTEER HOURS

Many times volunteers are working with our organization to earn volunteer service hours. If you are volunteering to earn service hours, please note how many hours you would like to work with us, what date you need these hours by, and what organization, class, etc you ware in need of the hours for.

Number of hours desired: _____ Needed by what date: _____

Organization, School, Etc hours will be reported to: _____

COMMUNITY LEARNING STANDARDS

In an effort to maintain a safe learning community, we must ask the following questions of all applicants. We cannot accept your application unless you answer these questions and provide the required documentation. Your “yes” answer to one or more of the following questions will not necessarily preclude your being hired. However, your failure to provide complete, accurate, and truthful information will be grounds to deny or withdraw your application, or to dismiss you after acceptance for volunteer service. For the purpose of the following six questions, “crime” or “criminal charge” refers to any crime other than a traffic-related misdemeanor or an infraction. You must, however, include alcohol or drug offenses whether or not they are traffic related.

If you answer “yes” to any of the questions below, you are required to provide your own written explanation of the event(s)

Have you ever been arrested? **YES** **NO**

Have you ever been convicted of a crime? **YES** **NO**

Have you entered a plea of guilty, a plea of no contest, a plea of nolo contendere, or Alford plea, or have you received a deferred prosecution or prayer for judgment continued, to a criminal charge? **YES** **NO**

Have you otherwise accepted responsibility for the commission of a crime? **YES** **NO**

Do you have any criminal charges pending against you? **YES** **NO**

Read, Sign, and Date the Following Statement

We cannot accept your application without your signature.

I certify that the information provided in my application is complete and accurate. I acknowledge that I have read the application instructions and agree to abide by the terms outlined within them. I authorize the Pitt County Arts Council at Emerge to make reasonable inquiry if any doubt should arise. I understand my failure to provide complete, accurate, and truthful information on this application will be grounds to deny or withdraw my application, or dismiss me after employment. I further understand that I am required to notify the Pitt County Arts Council at Emerge of any change in my mail or e-mail addresses.

Signature of applicant: _____ Date: _____

Read, Sign, and Date the Following Waiver

We cannot accept your application without your signature.

WAIVER OF LIABILITY: In consideration for the Pitt County Arts Council at Emerge making programs available to myself, I hereby release the Pitt County Arts Council at Emerge, it’s employees, volunteers, instructors, and agents from any and all liability, cost/expense associated with any injury I may sustain while participating in any of the programs and events.

Furthermore, I hereby hold the Pitt County Arts Council at Emerge it’s employees, volunteers, instructors, and agents harmless for any damage, loss, or claims to my person, child, or property. I assume full and all risks and responsibilities on the premises, both known and unknown. In case of an emergency, I give my permission to the Pitt County Arts Council at Emerge to select proper emergency care and treatment for myself.

Signature of applicant: _____ Date: _____

Please return applications to: the **Pitt County Arts Council at Emerge, Attn: Volunteer Application, 404 S. Evans St., Greenville, NC 27858.** For more information please contact Paula Rountree, Education Coordinator by phone (252) 551-6947 or email paula@pittcountyarts.org