



NOTES: \_\_\_\_\_

### VOLUNTEER APPLICATION

Date of Application: \_\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone Numbers (home): \_\_\_\_\_ (cell): \_\_\_\_\_ (work): \_\_\_\_\_

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

Previous Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

May we contact you at work?  Yes  No

How did you hear about There With Care? \_\_\_\_\_

In case of emergency, who should we contact? \_\_\_\_\_

Name: \_\_\_\_\_ Telephone Number(s): \_\_\_\_\_

Relationship: \_\_\_\_\_

#### What are you interested in?

Administrative/Clerical: \_\_\_\_\_  
*(please note skills/preferences)*

Availability: \_\_\_\_\_  
*(days / hours)*

Family Assistance: \_\_\_\_\_  
*(please note desired role and regional preferences)*

Availability: \_\_\_\_\_  
*(days / hours)*

Special Event: \_\_\_\_\_  
*(please note event)*

Availability: \_\_\_\_\_  
*(days / hours)*

Soup Station: \_\_\_\_\_  
*(please describe)*

Availability: \_\_\_\_\_  
*(days / hours)*

Other: \_\_\_\_\_  
*(please describe)*

Availability: \_\_\_\_\_  
*(days / hours)*

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Do you hold a valid driver's license?  Yes  No

If yes, which state? \_\_\_\_\_ Driver's License Number: \_\_\_\_\_ Expiration: \_\_\_\_\_

Have you ever had your driver's license suspended or revoked?  Yes  No

If yes, please explain: \_\_\_\_\_

Have you ever been convicted of a criminal offense?  Yes  No

If yes, please explain: \_\_\_\_\_

Do you use drugs that could impair your driving?  Yes  No

If yes, please explain: \_\_\_\_\_

***Please note that certain volunteer positions require completion of a criminal background check every year.***

### ***Volunteer History***

Do you have volunteer experience?  Yes  No

***If yes, please list, beginning with present or most recent experience.***

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Position and Responsibilities: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Dates of Service: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Position and Responsibilities: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Dates of Service: \_\_\_\_\_

Organization Name: \_\_\_\_\_

Address: \_\_\_\_\_

Position and Responsibilities: \_\_\_\_\_

Supervisor's Name and Title: \_\_\_\_\_ Telephone Number: \_\_\_\_\_

Dates of Service: \_\_\_\_\_

Have you ever been asked to relinquish a volunteer position?  Yes  No

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

## *Personal References*

Please provide three non-family references:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

If you would like to include additional information about yourself, please do so on the back of this form. You can attach a resume to this application.

If applying to donate professional services, please attach a copy of your current license or certificate.

## *Volunteer Acknowledgement*

I, \_\_\_\_\_ understand that the service I am performing for **There With Care** is being provided in a volunteer capacity. I understand that I will not receive any compensation or any other benefits in connection with my volunteer position.

My volunteer role may include one or more, but not all of the following:

Grocery delivery, prepared meal delivery, housecleaning, laundry service, handyman service, lawn & garden care, pet care, home modifications for disability access, industrial cleaning, babysitting services (waiting room or otherwise), tutoring for siblings, special event chaperone, transportation to school or activities, transportation to hospital or treatment visits, accounting services, legal services, alternative therapies, family counseling and/or individual counseling, hair cuts for the family, translating service, resource & information library, computer access.

**To the best of my knowledge, there is nothing that will prevent me from being able to perform the essential duties of this volunteer position, as explained to me in the volunteer training manual.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# ***Confidentiality, Conflict of Interest, and Ethics Statement***

As an employee/volunteer of There With Care, I have an obligation to the organization I serve, to the general public, and to myself to maintain the highest standards of ethical conduct. I will not commit acts contrary to these standards nor will I condone the commission of such acts by others within the organization. I have a responsibility to:

## **Confidentiality**

- **Keep confidential information confidential unless legally obligated to do otherwise.**
- Refrain from using or appearing to use confidential information acquired in the course of my service for unethical or illegal advantage either personally or through third parties.

## **Conflict Of Interest**

- Avoid direct or indirect, actual or apparent, conflicts of interest and advise all appropriate parties of any potential conflict, if:
  - a. A There With Care representative's personal business provides goods or services to There With Care for consideration.
  - b. A friend or relative of There With Care representative provides goods or services to There With Care for consideration.
  - c. A vendor or business acquaintance with whom a There With Care representative has an outside business relationship provides goods or services to There With Care for consideration.
- Refrain from engaging in any activity that would prejudice my ability or the ability of others to carry out duties ethically.
- Refuse any gift, favor, or hospitality that would influence or would appear to influence my actions or the actions of others, for example: a There With Care representative receives a referral fee or preferential discount, gift, or other valuable consideration from a vendor, paid promoter, fund-raising event sponsor, or any other outside party, for referring There With Care business to such party.

## **Legal Assurance**

- Submit to a criminal background check every three years.
- **Report any present, past, or future allegations of criminal activities, criminal investigations, arrests, and/or convictions involving myself.**

## **Integrity**

- Refrain from violating any criminal or civil law or regulation.
- Refrain from either actively or passively subverting the attainment of the There With Care's legitimate and ethical objectives.
- Refrain from engaging in or supporting any activity that would discredit There With Care.
- Perform my duties in accordance with relevant laws, regulations, There With Care policies and standards.
- Represent the interests of all people served by this organization and not favor special interests inside or outside the organization.

I, \_\_\_\_\_, attest and agree to be bound by the foregoing standards. I have not been party to an unethical or conflicting action that has not been previously disclosed. I also agree to report any potential future conflicts of interest or observed unethical activity of which I have become aware to the appropriate parties. **I do not currently have pending against me any criminal proceedings, nor have I been placed under arrest for or been convicted of a criminal offense within the past year.**

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*Signature*

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*Date*



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## ***Investigative Background Check Explanation***

The position(s) for which you have applied involves considerable responsibility. You may be entrusted with valuable assets of this organization, most importantly our children and families. As a condition of your service as a volunteer or staff member, we will perform an investigative background check (including a criminal record check), as required by There With Care, through AMERICANCHECKED, INC., a Professional Background Screeners and Consumer Reporting Agency. This background check must be updated every year.

All information provided will be kept confidential. Once There With Care receives the background check report from AMERICANCHECKED, INC., it is standard procedure to document receipt of a clear check, and then place the report in your file. The Disclosure & Release Form is retained in your file, in order to update your background check every three years.

Under the federal Fair Credit Reporting Act (FCRA), the background screening reports that AMERICANCHECKED, INC. supplies are classified as "consumer reports". This includes ALL types of reports, such as credit reports, motor vehicle reports, and criminal records. These reports are governed by the FCRA, which provides protections and responsibilities to those who either use or provide consumer reports, and to the subjects of those reports. **Therefore, as a "user of consumer reports", There With Care is required to give the attached "Summary of Your Rights Under the Fair Credit Reporting Act" to you, the "subject" of the search and resulting report.** The language of this document pertains largely to consumer credit reports and employment history. **Be assured, There With Care is NOT pulling your credit reports or employment history.** Our organization requires a criminal background check on all volunteers and staff, which is accomplished by searching national databases using the information you will choose to share with us for this purpose only, i.e., other names used, past places of residence, SSN, date of birth, and driver's license number.

*You have the right to receive, upon your written request within a reasonable period of time, (not to exceed 30 days) a complete and accurate disclosure of the nature and scope of the investigation requested. You have the right to make a request to AMERICANCHECKED, INC., upon proper identification, to request the nature and substance of all information in its files on you at the time of your request, including the sources of information, and the recipients of any reports on you that AMERICANCHECKED, INC. has previously furnished within the two-year period preceding your request. AMERICANCHECKED, INC. may be contacted by mail at 4870 S. Lewis Ave., Ste. 211, Tulsa, Oklahoma, 74105, or by phone at (800) 975-9876.*

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

# *Investigative Background Report Disclosure & Release*

In connection with my employment/volunteerism or application for employment (including contract for services and volunteer work), an investigative consumer report and consumer reports, which may contain public record information, may be requested from AMERICANCHECKED, INC. These reports may include the following types of information: names and dates of previous employers, reason for termination of employment, work experience, accidents, academic history, professional credentials, drugs/alcohol use, information relating to your character, general reputation, personal characteristics, mode of living, educational background, or any other information about you which may reflect upon your potential for employment gathered from any individual, organization, entity, agency, or other source which may have knowledge concerning any such items of information. Such reports may contain public record information concerning your driving record, workers' compensation claims, credit, bankruptcy proceedings, criminal records, etc., from federal, state and other agencies which maintain such records.

I authorize AMERICANCHECKED, INC. to prepare a consumer report or investigative consumer report about me and disclose such to the requesting company. Further purpose of determining my eligibility for employment retention, promotion or suitability as a volunteer. If the requesting company is placing me with another entity, I consent to the report being provided to such other entity. If hired, contracted or accepted as a volunteer, this authorization shall remain on file and shall serve as ongoing authorization for the procurement of consumer reports at any time during my employment/volunteerism or contract period. I have been provided a copy of the summary of the rights of the consumer pursuant to the Fair Credit Reporting Act (FCRA).

I hereby fully release and discharge AMERICANCHECKED, INC., their respective affiliates, subsidiaries, directors, officers, employees, agents and attorneys thereof, and each of them, and any individual, organization, entity, agency, or other source providing information to AMERICANCHECKED, INC. from all claims and damages arising out of or relating to any investigation of my background for employment/ volunteer purposes. This release is valid for all federal, state, county and local agencies, authorities, previous employers, military services and educational institutions.

By signing below, I certify that I have read and fully understand this release, that prior to signing I was given an opportunity to ask questions and to have those questions answered to my satisfaction, and that I executed this release voluntarily and with the knowledge that the information being released could affect my being hired, my employment/volunteerism, or my eligibility for promotion.

## **Notice To All Applicants**

You have the right to receive, upon your written request within a reasonable period of time, (not to exceed 30 days) a complete and accurate disclosure of the nature and scope of the investigation requested. You have the right to make a request to AMERICANCHECKED, INC., upon proper identification, to request the nature and substance of all information in its files on you at the time of your request, including the sources of information, and the recipients of any reports on you that AMERICANCHECKED, INC. has previously furnished within the two-year period preceding your request. AMERICANCHECKED, INC. may be contacted by mail at 4870 S. Lewis Ave., Ste. 120, Tulsa, Oklahoma, 74105, or by phone at (800) 975-9876.

## **Notice to California Applicants**

Under California law, the consumer reports we order on you for employment purposes within the State of California are defined as investigative consumer reports. These reports may contain information on your character, general reputation, personal characteristics and mode of living. Under section 1786.22 of the California Civil Code, you may view the file maintained on you by AMERICANCHECKED, INC. during normal business hours. You may also obtain a copy of this file upon submitting proper identification and paying the costs of duplication services, by appearing at AMERICANCHECKED, INC. in person, by mail, or by telephone. AMERICANCHECKED, INC. may be contacted by mail at 4870 S. Lewis Ave., Ste. 120, Tulsa, Oklahoma, 74105, or by phone at (800) 975-9876. The agency is required to have personnel available to explain your file to you and the agency must explain to you any coded information appearing in your file. If you appear in person, a person of your choice may accompany you, provided that this person furnishes proper identification

Applicant Signature \_\_\_\_\_

Today's Date \_\_\_\_\_

Print your full name \_\_\_\_\_

For purposes of gathering this information, I agree to supply the following information, which may be required by law enforcement agencies and other entities for positive identification purposes when checking records. It is confidential and will not be used for any other purpose.

Print other last names you have used \_\_\_\_\_

Current Address \_\_\_\_\_ How long? \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Social Security No. \_\_\_\_\_ Date of Birth \_\_\_\_\_

Driver's License No. \_\_\_\_\_ State Issuing License \_\_\_\_\_

California, Minnesota and Oklahoma Applicants Only: I request a free copy of any consumer report ordered on me.

**Company Name:** There With Care **Location.:** 2825 Wilderness Place Suite 100 Boulder CO 80301

Attached to this disclosure is a written summary of your rights under the Fair Credit Reporting Act (FCRA) as prepared by the Federal Trade Commission.

**I HAVE COMPLETED AND REVIEWED THIS ENTIRE FORM AND ATTEST THAT THE INFORMATION PROVIDED IS TRUE. ADDITIONALLY, I UNDERSTAND THAT CERTAIN VOLUNTEER POSITIONS MAY REQUIRE THE COMPLETION OF A CRIMINAL BACKGROUND CHECK.**

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

**If applicant is under the age of 18, please complete the following section.**

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Return pages 1-7 to:

There With Care  
2825 Wilderness Place Suite 100  
Boulder, Colorado 80301  
(303) 447-CARE (2273)  
Fax: (303) 447-2274

# THE FOLLOWING TWO PAGES ARE FOR YOUR RECORDS YOU DO NOT NEED TO RETURN THEM TO THERE WITH CARE.

AmericanChecked, Inc.

Section 4

FCRA SUMMARY OF RIGHTS



*Para informacion en espanol, visite [www.ftc.gov/credit](http://www.ftc.gov/credit) o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.*

## A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to [www.ftc.gov/credit](http://www.ftc.gov/credit) or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identify theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See [www.ftc.gov/credit](http://www.ftc.gov/credit) for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected,

usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to [www.ftc.gov/credit](http://www.ftc.gov/credit).
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit [www.ftc.gov/credit](http://www.ftc.gov/credit).

**States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:**

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center - FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Comptroller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institution's name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in institution's name)	National Credit Union Administration 1775 Duke Street Alexandria, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator - GIPSA Washington, DC 20250 202-720-7051