

GIRL SCOUTS OF GLOWING EMBERS COUNCIL, INC.
ADULT VOLUNTEER APPLICATION/SCREENING FORM

Please return this form to the appropriate council staff person in the attached confidential envelope. All information will be kept strictly confidential and is required by Michigan State Police for a criminal history check. Criminal history checks are conducted on all staff and volunteers to assist us in providing the safest atmosphere for our participants.

Name _____ E-Mail Address _____

Address _____ City _____ Zip _____

Daytime Phone (_____) _____ Evening Phone (_____) _____ Cell Phone (_____) _____

Date of Birth (M/D/Y) _____ Sex: F M Driver's License # _____ State Issued _____

Previous Married Name(s), Alias or Maiden Name _____

Auto Insurance Company _____ Policy # _____

School District/County _____ Troop # (if known) _____

I prefer to work with (check one): Volunteer role:
 Children Adults Leader/Co-Leader Cookie Program Volunteer Other _____

Age Preference: Daisy (ages 5-6) Brownie (ages 6-8) Junior (ages 8-11) Cadette (ages 11-14) Senior (ages 14-17)

EMPLOYMENT EXPERIENCE (List most recent first): No work experience

Company Name: _____ Position _____

Address _____ City _____ Zip _____

Dates: From _____ to _____ Reason for leaving _____

Supervisor's Name _____ Company Phone _____

Company Name: _____ Position _____

Address _____ City _____ Zip _____

Dates: From _____ to _____ Reason for leaving _____

Supervisor's Name _____ Company Phone _____

Have you ever been convicted of a felony or misdemeanor? NO YES

If YES, please state offense, date of conviction and location:

A conviction will not necessarily be cause for disqualification. It is simply one piece of information that will be considered in determining the suitability of an individual to be a Girl Scout volunteer.

List 3 character references (persons not related to you who can judge your qualifications for this position):

	Name	Address	City	Zip	Phone
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____

I certify that all information provided on this application is true and complete. I authorize Girl Scouts of Glowing Embers Council, Inc. (GSGEC) to make a complete inquiry of my educational, personal, criminal, and employment background for the protection of participants in Girl Scouting. I further authorize these references to release my records/information to GSGEC. I understand that membership in Girl Scouts is voluntary and open to all adults who accept the Girl Scout Promise and Law.

Signature _____ Date _____