

VOLUNTEER APPLICATION

APPLICANT INFORMATION

Thank you for your interest in volunteering with the T. Rich foundation, Inc. Please fill out the application and return it to <u>trichfoundation@gmail.com</u>. The Foundation conducts background checks on mentor volunteers to screen for criminal backgrounds that would exclude some from participating in our programs. We appreciate your understanding and willingness to help us create a safe environment for all participants and volunteers.

Name:			
Date of birth:	SSN:	Driver's License #:	
Current address:			
City:	State:	ZIP Code:	
Cell Phone:	Home Phone:	Work Phone:	
Email Address:	Organization / School / Employer:		
EMERGENCY CONTACT			
Name:			
Address:		Phone:	
City:	State:	ZIP Code:	
Relationship:			
References			
Name	Address	Phone	

How did you hear about volunteering for the T.Rich Foundation?				
What areas are you interested	Quarterly Fundraiser	Mentor □		
in serving?	Friends of the T. Rich Foundation D	☐ Scholarship Committee ☐		
VOLUNTEER LIABILITY RELEASE				
I hereby give my permission for the release to The T.Rich Dream. Believe. Work Foundation, Inc. of information from law enforcement files concerning any conviction, any pending charges or any arrests. Initials				
I understand that the T.Rich Dream. Believe. Work Foundation, Inc. has the right to require this record check as a condition of volunteering. Initials				
I understand that registered sex offenders may not volunteer at the T.Rich Dream. Believe. Work Foundation, Inc. By initialing, I assert that I am not a registered sex offender with the State of Arkansas or any state within the United States. All volunteer names will be checked against the public list of registered sex offenders. Initials				
I understand that this information will be used only for administrative purposes and will not be redistributed to other persons or used for any other purpose.				
Signature of applicant:		Date:		

Please email completed application to

www.trichfoundation@gmail.com