

## **Early Childhood Education and Care Volunteer & Academic Intern Clearance**

**Role:**

The person selected for a volunteer or academic intern position will assist with supervision and group management under the direct supervision of a fully qualified/lead teacher.

**Purpose:**

Volunteers and academic interns are expected to be a model, demonstrating the kinds of values, attitudes, expectations, beliefs, and choices that make our organization excellent.

**Qualifications:**

Minimum age requirements for a volunteer or academic intern are: 16 years of age or older.

Volunteers and academic interns who are 18 years of age and older must have a criminal record clearance from the state     (List appropriate Agency)    , Federal Bureau of Investigation, and the state     (List appropriate Agency)    .

Prior to being assigned class work, all volunteers and academic interns must have completed a physical examination and must submit a form indicating that they are free of communicable diseases.

Prior to being assigned to duties, all volunteers and academic interns must submit a minimum of three references.

Academic interns must be completing college-level Early Childhood Education and/or Child Development courses and laboratory requirements. Academic interns must have completed the necessary prerequisites to receive course credit rather than remuneration for hours worked in the ECEC program.

**Responsibilities include but are not limited to the following:**

Volunteers and academic interns report to the Director and may not be left alone with children at any time.

Prior to work, the director will conduct an orientation session. All volunteers/academic interns are required to participate in each session. Failure to participate will result in elimination from the volunteer/academic intern list. The orientation will include at least the following topics:

- Child care program philosophy, goals, and objectives
- Care of young children
- Record keeping procedures and confidentiality
- Emergency procedures

Volunteers and academic interns receive a staff directory and an introduction to staff members. The director will discuss the organizational structure of the child care program.

Volunteers and interns over the age of 18 years may assist with daily program activities, except the feeding or toileting of children.

Volunteers and interns can assist in fund raising and program promotion.

Volunteers and interns will be dismissed from services if they violate any policies, rules, and/or procedures of the child care program.

Professionalism:

The program builds its reputation by providing a professional attitude in conversations with other employees, parents, or agencies. Volunteers and academic interns are expected to speak professionally about their own program or staff. If there is a grievance or concern, the proper channels should be followed to resolve the situation.

SAMPLE

**CONFERENCE OF SEVENTH-DAY  
ADVENTISTS**  
**VOLUNTEER INFORMATION FORM**

All questions on this form should be answered clearly and completely in your own handwriting. Do not type. If you cannot answer all questions on this form, you will be ineligible to serve as a volunteer. This form should be submitted to \_\_\_\_\_.

Name \_\_\_\_\_ Date \_\_\_\_\_

Mailing Address \_\_\_\_\_  
                                 Street                                  City                                  State                                  Zip

Telephone (     ) \_\_\_\_\_ Social Security No. \_\_\_\_\_  
                                 Residence                                  Other

Have you ever used any other name(s) for work, school or other reasons? If yes, list name(s) and dates/ locations used and circumstances. \_\_\_\_\_

Person to Notify in Case of Emergency \_\_\_\_\_  
   Name    Telephone

List the functions you are willing to perform as a volunteer:  
 1) \_\_\_\_\_ 3) \_\_\_\_\_  
 2) \_\_\_\_\_ 4) \_\_\_\_\_

Dates and times available for volunteering: \_\_\_\_\_

Current Church Membership (if less than one year, also provide prior Church membership): \_\_\_\_\_

**LANGUAGE(S)**

Please list all languages (including English) that you speak, read or write proficiently:

Language	Speak	Read	Write	Comments
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

**VOLUNTEER EXPERIENCE**

Please list examples of volunteer service/experience

Type of experience	Organization	Dates of Volunteer Service
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

(use additional sheets if necessary)

**WORK EXPERIENCE**

Have you ever been employed by the \_\_\_\_\_ Conference?  Yes  No *If yes, provide dates and position(s) held:* \_\_\_\_\_

Provide information regarding your employment experiences (types, positions held, skills and any certifications):

Have you ever been discharged or counseled to resign by any employer?  Yes  No

*If yes, provide information on employer, date, action and explanation* \_\_\_\_\_

Please list below three individuals (excluding family members) who have known you for at least one year and can verify that you are qualified to perform services as a volunteer.

1. Current Pastor \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_

2. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_  
Relationship to Reference: \_\_\_\_\_

3. Name \_\_\_\_\_ Telephone \_\_\_\_\_  
Address \_\_\_\_\_  
Relationship to Reference: \_\_\_\_\_

**CRIMINAL HISTORY INFORMATION**

You are not obligated to disclose sealed or expunged records of convictions or arrests in response to the questions on this application. Do not disclose sealed or expunged records.

Unless a time limit is stated in a question, please provide information on **ALL** convictions, pleas and alternative sentencing or disposition programs that have occurred during your lifetime. Records of offenses by minors (under age 18) are not automatically sealed and should be disclosed, except where non-disclosure is required by state law.

You should disclose any criminal offense that may appear on your record. If you are uncertain of the exact date or how a criminal offense was classified, give the approximate date, your understanding of the criminal offense, and note that you are unsure of any more specific information.

Have you **EVER** pled guilty to any criminal offense (misdemeanor or felony)?  Yes  No

Have you **EVER** pled *nolo contendere* (no contest) to any criminal offense (misdemeanor or felony)?

Yes  No

Have you **EVER** been convicted of any criminal offense (misdemeanor or felony)?  Yes  No

Have you **EVER** served or participated in any form of alternative sentencing or disposition program (for example, probation, pretrial diversion, or deferred adjudication) for any criminal offense?

Yes  No

Have you ever been charged, convicted, pled guilty, pled no contest or received any form of alternative sentence for any crime involving child or elder abuse or sexual abuse?  Yes  No

If you answered "Yes," to any of these criminal record questions, please provide details in the space provided below:

Date of Offense \_\_\_\_\_  
City/County/State \_\_\_\_\_  
Nature of Offense \_\_\_\_\_  
\_\_\_\_\_  
Disposition \_\_\_\_\_

(use additional sheets if necessary)

Answering "yes" will not automatically disqualify you from serving as a volunteer. The \_\_\_\_\_ Conference will consider the nature of the volunteer services to be performed, as well as the nature of the criminal offense and the length of time since the criminal offense occurred.

### MOTOR VEHICLE RECORD

Please complete this section only if your volunteer services would include driving a Conference or personal vehicle.

Driver's License No. \_\_\_\_\_ Issuing State: \_\_\_\_\_ Expiration Date \_\_\_\_\_

Has your driver's license ever been denied, suspended or revoked?  Yes  No

If yes, provide complete information on action(s), date(s), location(s) and current status: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all violations (other than parking tickets) for which you have been convicted, pled guilty or no contest, or served any alternative sentencing or disposition program within the past 5 years: \_\_\_\_\_  
\_\_\_\_\_

Do you have automobile liability insurance?  Yes  No If yes, expiration date: \_\_\_\_\_

### CONFIRMATION OF VOLUNTEER STATUS

You acknowledge that you have requested to volunteer your services for your individual purposes with no promise or expectation of compensation. You acknowledge that you are not an employee, contractor, or agent of the \_\_\_\_\_ Conference and will not receive any wages or benefits in exchange for your volunteer service.

You may cease to volunteer with the \_\_\_\_\_ Conference at any time. The \_\_\_\_\_ Conference may at any time, with or without prior notice, request that you cease volunteering or that you not participate in specific activities.

Your volunteer services to the \_\_\_\_\_ Conference does not make you eligible for employment. Your volunteer activities will not replace employees of the \_\_\_\_\_ Conference. If you become interested in employment with the \_\_\_\_\_ Conference, you must fulfill the Conference's standard hiring requirements and procedures.

**VERIFICATION**

I acknowledge that I have read and understand this volunteer application form. I verify that the information I have provided on this form is true, correct and complete and contains no omissions. I authorize the \_\_\_\_\_ Conference to review and use information about me that is available on the Internet. I understand that false, incorrect, misleading or incomplete information on this form will result in my being ineligible to serve as a volunteer.

I authorize the \_\_\_\_\_ Conference to confirm information supplied on this volunteer information form. I authorize the \_\_\_\_\_ Conference to review and use information about me that is available on the Internet. I agree to furnish additional information if requested by the \_\_\_\_\_ Conference. I release the \_\_\_\_\_ Conference and all parties and persons from any claims, liabilities and damages that may result from requesting or furnishing information about me and using such information in considering me as a volunteer. This authorization to obtain background information does not include a consumer report under the federal Fair Credit Reporting Act. If the \_\_\_\_\_ Conference conducts a consumer report or background check about me under the federal Fair Credit Reporting Act, I understand that I will receive a separate notice and authorization for that consumer report.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

SAMPLE