

Many of our volunteer opportunities require a **criminal background check** as part of risk management policies. A criminal check will be considered *only* as it relates to specifics of the position for which you are interested in volunteering. Please indicate consent for the criminal background check to be conducted by completing the "Authorization to Release Information and Records" form attached. Return this completed application to the address below.

The Youth Foundation
PO Box 2761
Edwards, Colorado 81632
Phone: 970-763-7000
Fax: 970-926-0265
Mobile: 970-390-9513
Email: heather@theyouthfoundation.org
Website: www.theyouthfoundation.org

I certify that all information in this application is true and complete. I understand that misrepresentation or omission of facts requested is cause for non-appointment or dismissal as a volunteer. If required by my volunteer site, I agree to comply with a criminal background.

I understand that volunteerism is a privilege, not a right, and that my placement in a volunteer position is conditional upon successfully completing the application, screening, and training requirements. I also understand that until the application process is complete, my volunteer activity cannot be recorded.

Signature _____ **Date** _____

For Youth Foundation Use

Entered into DonorPerfect: Yes No

Attend Volunteer Orientation: Yes No Date: _____

Program Site Visit: _____ Date: _____

Program Placement: _____ Days: _____ Times: _____

Volunteer Start Date: _____

Other Notes _____
