The Sparrow Project Volunteer Application Form

Participant Information (ple	ease print):		
Name:			
Date of Birth:		Age:	
Address:			
City:	State:	Zip:	
Phone #:	Alternate Phone #: _		
Email:			
Current Employer:			
Please list past work and/ o	r volunteer experience that ma	ny be pertinent to this organiza	tion:
Please list any certifications	and/or licenses you hold:		
_			
_			

Areas of Interest:		
Availability:		
References: 1. Personal/Character Ref	erence	
Name:		
Phone Number:	Email:	
2. Professional Reference		
Name of Supervisor (teach	er if a minor):	
Phone Number:	Email:	
Emergency Contact Name:		
Relationship to Volunteer:		
-		

Volunteer Name (Printed)	Volunteer Signature	
Guardian Name if under 18 (Printed)	Guardian Signature if under 18	
Date		
– – – – – _{Fo}	or Program Use Only	
Reference Checks Complete: Yes	No No	
Background Complete: Yes	No	
Background Check Fee Amount Receiv	ed:By:	
Notes:		

ACKNOWLEDGMENT (SPARROW COPY)

The information contained in The Sparrow Project Volunteer Handbook applies to all volunteers and is presented as a matter of information only; the contents of this handbook should not be interpreted as a contract between the volunteer and The Sparrow Project.

I have received, read, and understand the Volunteer Handbook. Any question I had about the Volunteer Handbook has been explained to me. I agree to adhere to the terms of the Volunteer Handbook as a condition of my participation in The Sparrow Project activities and functions.

I understand and acknowledge that there may be changes to the information and policies in the handbook. I understand that The Sparrow Project may add new policies to the handbook as well as replace, change, or cancel existing policies.

I understand that, while volunteering at The Sparrow Project, I may have access to information of a sensitive nature regarding the families and children who come to The Sparrow Project. I further understand and agree to comply with The Sparrow Project's policy of holding any and all information, either divulged or received, in strictest confidence.

I hereby grant The Sparrow Project and its respective licensees, successors and assigns, the right and permission, with respect to those photographs, video recordings, and/or audio recordings taken of me and with respect to any printed and/or electronic matter in connection therewith, to do the following:

- 1. To include such photographs, video recordings, and/or audio recordings in all promotion of this university event and/or in all media (print/online), and advertising, publicity, and promotion thereof.
- 2. To use my name in connection with the foregoing.

I hereby release, discharge, and agree to indemnify and hold harmless The Sparrow Project and its successors and assigns, from all claims and demands whatsoever arising out of or in connection with the foregoing, and waive any right to inspect or approve the same. Additionally, by signing I understand there will not be any form of compensation for the usage of the photographs.

Furthermore, this is to certify that I will hold harmless The Sparrow Project and all providers of facilities (including Moore Public Schools) regarding liability for any accident or injury that may occur through my participation in The Sparrow Project activities and functions.

Volunteer Signature	Date
Volunteer Printed Name:	

VOLUNTEER INTEREST & AVAILABILITY WORKSHEET

Volunteer Name:
Areas of Interest
Areas of Interest:
Abilities & Skills:
Tibilities & GRins.
Availability: