

## ROTARY DISTRICT 5000 YOUTH PROGRAMS VOLUNTEER AFFIDAVIT

District 5000 is committed to creating and maintaining the safest possible environment for all participants in Rotary activities. It is the duty of all Rotarians, Rotarians' spouses, partners and other volunteers to safeguard to the best of their ability the welfare of and to prevent the physical, sexual, or emotional abuse of children and young people with whom they come into contact.

### PERSONAL INFORMATION

Name:

Address:

City: \_\_\_ State: \_\_ ZIP:

Home Phone: \_\_\_ Email:

Business Phone:

Fax:

How long at this address? \_\_\_ (If less than 5 years, please list prior residence(s) on back of this sheet.)

Social Security Number: \*

Date of Birth: \*

\* May be submitted by telephone to the District Protection Officer

Are you a member of a Rotary club? Yes  No

If yes, please give club name and year joined:

Position applying for:

Have you worked with youth in Rotary in the past? Yes  No

If yes, what position and when?

**EMPLOYMENT HISTORY (5-years – please attach additional sheets, if necessary)**

*District 5000 Youth Programs Volunteer Affidavit 2*

*Appendix A*

*Revised: 2007.04.02*

Current Employer:

Address/City/State/Zip:

Telephone:

Position:

How long with this company? \_\_\_ Supervisor's Name:

Previous Employer:

Address/City/State/Zip:

Telephone:

Position:

How long with this company? \_\_\_ Supervisor's Name:

VOLUNTEER HISTORY WITH YOUTH (5 years – please attach additional sheets, if necessary)

Organization name:

Address/City/State/Zip:

Telephone: \_\_\_ Position:

Dates Held: \_\_\_ Director's Name:

Previous Organization:

Address/City/State/Zip:

Telephone: \_\_\_ Position:

Dates Held: \_\_\_ Director's Name:

PERSONAL REFERENCES (not relatives and not more than one former or current Rotarian)

1. Name:

Address/City/State/Zip:

Telephone: \_\_\_ Relationship:

2. Name:

Address/City/State/Zip:

Telephone: \_\_\_ Relationship:

3. Name:

Address/City/State/Zip:

Telephone: \_\_\_ Relationship:

CRIMINAL HISTORY

1. Have you ever been convicted of or plead guilty to any crime(s)? YES  NO

2. Have you ever been subject to any court order involving any sexual, physical or verbal abuse including but not limited to any domestic violence or civil harassment injunction or protective order? YES  NO

If yes on number one or two above, describe in full. Also indicate date(s) or crime(s) and in which country and state each took place. (Attach a separate sheet if necessary).

WAIVER/CONSENT/RELEASE

I certify that all of the statements in this affidavit, and in any attachments hereto, are true and correct to the best of my knowledge. I also certify that I have not withheld any information that would affect this affidavit unfavorable, if disclosed. I understand that

any omission of facts or misrepresentation will result in my elimination from consideration for any volunteer position with District 5000 youth program or its affiliates. I further certify that I understand that District 5000 youth program's intent is to deny a position to anyone convicted of a crime of violence or a crime against another person. I hereby give my permission for District 5000 to investigate, verify and obtain information given in this affidavit, including searches of law enforcement and published records (including driving records and criminal background checks), contact with former employer and reference interviews. I understand that this information will be used, in part to determine my eligibility for a volunteer position with District 5000 youth programs. I also understand that as long as I remain a volunteer here, the criminal history records check may be repeated at any time. I understand that I will have an opportunity to review the criminal history and that there is a procedure available for clarification, if I dispute the record as received. I further agree to conform to the rules, regulations and policies of Rotary International, District 5000 youth programs and its affiliates, and understand that my service can be modified or terminated, with or without notice or cause, at any time, at the option of either the District youth programs or its affiliates, or at my option. I understand and agree that District 5000 youth programs or its affiliates may, in their sole discretion, decline to accept my application for volunteer services with or without cause.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE AFFIDAVIT, WAIVER, CONSENT AND RELEASE, AND THAT I SIGN THIS FORM VOLUNTARILY.

[Click here to enter text.](#)

\_\_\_\_\_  
Signature of Applicant Please Print Name Date

**For District Use Only:**

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References checked by \_\_\_\_\_

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Date Initials

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References checked by \_\_\_\_\_

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Date Initials

*District*