

Attachment B. Volunteer Application Form

Name: _____

Address (street, city, state, zip code):

Daytime Phone: _____ Alternate Phone: _____

Date of Birth (month and year): _____

Why are you interested in volunteering at the Bradbury Science Museum Association?

Provide two references, other than family members.

1. Name: _____ Relationship: _____

Daytime Phone: _____ Alternate Phone: _____

2. Name: _____ Relationship: _____

Daytime Phone: _____ Alternate Phone: _____

Emergency contact:

Name: _____ Relationship: _____

Street Address: _____ City, State, Zip: _____

Home Phone: _____ Alternate Phone: _____

Where did you hear about volunteering at Bradbury Science Museum Association?

☐ From a friend

☐ Radio/TV ad

☐ Museum staff member or volunteer

☐ Parents or other family member

☐ Museum newsletter

☐ Other (please list): _____

Have you ever been convicted of any crime?
Yes ___ No ___ If yes, please explain.

Please note the days of the week and times you may be available to volunteer.

Please provide any further information you would like us to have in the space below.

(Particular skills you could offer as volunteer, volunteer positions you are interested in, etc.)

The agreement between Bradbury Science Museum Association (BSMA) volunteers,

_____, is as follows.

THE VOLUNTEER AGREES TO THE FOLLOWING, to:

1. Abide by all policies and procedures of BSMA, as outlined in the Volunteer Handbook.
2. Provide accurate and up-to-date information on all application materials.
3. Successfully complete volunteer orientation prior to service.
4. Schedule volunteer service in advance by agreement with the Volunteer Coordinator, through phone call, e-mail, or by signing up on the calendar in the volunteer office.
5. Arrive on time as scheduled, willing to carry out assignments and duties with a positive attitude and in a responsible manner.
6. Provide a minimum of 24 hours notice if unable to work, except in the case of emergency or sudden illness.
7. Successfully complete all required training for his/her particular position.
8. Commit to providing volunteer service on a regular basis.
9. Sign in and sign out accurately each time volunteer service is provided.

10. Accept BSMA's right to dismiss any volunteer for poor performance, including attendance, conduct or attitude.

THE BRADBURY SCIENCE MUSEUM ASSOCIATION AGREES TO THE FOLLOWING, to:

1. Provide a professionally structured and well-managed volunteer program.
2. Provide orientation, on-the-job training, evaluation, and supervision for the volunteer.
3. Provide accurate record keeping of service and recognition for that service.
4. Provide enrichment opportunities for volunteers in addition to regular training.
6. Allow for change of assignments as appropriate for both BSMA and the volunteer.
7. Provide each volunteer with a nametag and a copy of the volunteer handbook.
8. Provide responsible volunteers with a reference, if needed, for future employment or education.

I understand that a background check will be conducted as part of my volunteer application.

Adult Volunteer Signature/Date

Volunteer Coordinator/BSMA Executive Officer Signature/Date

Bradbury Science Museum Association Disclosure & Authorization

DISCLOSURE AND AUTHORIZATION FORM TO OBTAIN CONSUMER REPORTS FOR EMPLOYMENT PURPOSES

Please Read Carefully Before Signing the Authorization

DISCLOSURE

In considering you for employment and, if you are employed, in considering you for subsequent promotion, assignment, reassignment, retention, or discipline, Bradbury Science Museum Association ("the Company") may request and rely upon one or more consumer reports or investigative consumer reports about you that we obtain from a consumer reporting agency, such as IntelliCorp Records, Inc.

IntelliCorp Records, Inc. can be contacted by mail at 3000 Auburn Dr, Suite 410; Beachwood, OH 44122; or phone: 1-888-946-8355; or website: www.intellicorp.net.

For explanation purposes:

- a "consumer report" is a written, oral or other communication of any information by a consumer reporting agency bearing on your credit worthiness, credit standing, credit capacity, character, general reputation, personal characteristics, or mode of living which is used or expected to be used or collected in whole or in part for the purpose of serving as a factor in making an employment-related decision about you. Such information may include, for example, credit information, criminal history reports, or driving records; and
- an "investigative consumer report" is a consumer report in which information on your character, general reputation, personal characteristics, or mode of living is obtained through personal interviews with your prior employers, neighbors, friends, or associates, or with others who may have knowledge concerning any such items of information. In the event an investigative consumer report is requested about you, you are entitled to additional disclosures regarding the nature and scope of the investigation requested, as well as a written summary of your rights under the Fair Credit Reporting Act ("FCRA").

Under the FCRA, before the Company can obtain a consumer report or investigative consumer report about you for employment purposes, we must have your written authorization. Before we take adverse action on the basis, in whole or in part, of information in that report, you will be provided a copy of that report, the name, address, and telephone number of the consumer reporting agency, and a summary of your rights under the FCRA.

Bradbury Science Museum Association Disclosure & Authorization

AUTHORIZATION

I have read and understand the foregoing Disclosure, and authorize Bradbury Science Museum Association to obtain and rely upon consumer reports or investigative consumer reports concerning me. By my signature below, I authorize the Company to obtain any such reports and to share the information received with any person involved in their decision about me.

I do _____ do not _____ authorize you to contact *my current* employer for Employment and Reference Verifications

(This will authorize immediate inquiries to the Human Resources Department and to any listed supervisors or references in the Employment/Reference Section of your application.)

I also agree that this Disclosure and Authorization in original, faxed, photocopied, or electronic (including electronically signed) form will be valid for any consumer reports or investigative consumer reports that may be requested about me by or on behalf of the Company.

Printed Name

Applicant Signature

Date

Parent or Legal Guardian Signature
(for searches conducted on minors under
the age of 18)

Date

Bradbury Science Museum Association Disclosure & Authorization

Personal Data

Last Name First Name Middle Name

Current Address
Lived Here Dates

Addresses for the Past Seven Years: (include street, city, state, zip code) Dates of Residence:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Date of Birth Other Names Used (including maiden name) Years Used

Social Security Number Driver's License # State

Email address (may be used for official correspondence)

I have the right to make a request to **IntelliCorp Records, Inc**, upon proper identification, to request the nature and substance of all information in its files on me at the time of my request, including sources of information, and the recipients of any reports on me which **IntelliCorp Records, Inc** has previously furnished within the two year period preceding my request.

I certify that all elements of the personal data I have provided are true, accurate and complete. I understand and agree that any omission, false statement, misleading statement, or answer made by me will be sufficient grounds for rejection or discharge.

Printed Name Applicant Signature Date