

Diversified Inspirational Youth Center

D.I.Y.C organization encourages the participation of volunteers who support our mission. If you agree with our mission and are willing to be interviewed and trained in our techniques, we strongly invite you to complete this application. The information obtain on this document will be kept confidential and will help us find the most right and fitting volunteer opportunity that suits you.

There are a few diverse volunteer opportunities to select from:

Clerical- You can help with office tasks such as, making copies, making phone calls, filing, etc.

Events- Chaperone during doctor visits, outings, extra activities, etc.

Mentoring- This position has a positive and beneficial reward for both participants. The goal is to develop leadership, positive role models and it shows that someone cares.

Tutoring- Is a positive reinforcement to help youth set realistic expectations for themselves. Individuals will have the opportunity to learn at their own past and breakdown assignments in smaller parts. Fostering independence, critical thinking, and minimizing self-defeat is the main key to their learning development.

Counseling- The position is rewarding because it helps youth overcome their challenges and improve problem solving. Helping youth with emotional, mental, physical, behavioral, and substance abuse will improve their overall well-being.

Volunteer Confidentiality Agreement

This agreement applies to all volunteers associated with and/or involved in the activities or relationships of Diversified Inspirational Youth Center. This includes all activity associated with DIYC at its main office and all outreach sites locations.

As a volunteer for Diversified Inspirational Youth center a non-profit organization serving youth and their families, I may become cognizant of personal and private areas of people's lives. I agree to keep the following strictly confidential and will not copy, allocate or make available to others. Resident information, including all file information, is not be disclosed to any third party, under any circumstances, without the consent of DIYC employee that is supervising you and the Executive Director. Any and all DIYC residents and family information and records, including and not limited to, names, diagnoses, treatments etc.

All data, materials, knowledge and information generated through, originating from, or having to do with DIYC or persons associated with our activities, including contractors, is to be considered privileged and confidential and is not to be disclosed to any third party. All pages, forms, information, designs, documents, printed matter, policies and procedures, conversations, messages (received or transmitted), resources, contacts, e-mail lists, e-mail messages, client, staff or public information is confidential and the sole property of DIYC.

This also includes, but is not limited to, any information of, or relating to, our staff, clients, operations and activities. This privilege extends to all forms and formats in which the information is maintained and stored, including, but not limited to hardcopy, photocopy, and microform, automated and/or electronic form.

I agree to abide by this Agreement and maintain confidentiality during my volunteering for Diversified Inspirational Youth Center and after my volunteering is complete.

I understand that this signed form will become part of my volunteer file, and violation of this policy will be considered grounds for terminating my service to D.I.Y.C organization and/or prosecution, according to the procedures set by DIYC and any applicable laws.

My signature signifies I agree to abide by this terms and agreement and maintain confidentiality during my volunteering for Diversified Inspirational Youth Center and after my volunteering is complete.

Signature of Volunteer

Date: _____

Signature of DIYC Supervisor

Date: _____

Volunteer Information/Consent to Background Check

Name: (First and Last) _____ Female ☐ Male ☐

Address: _____

City: _____ ST _____ Zip _____

Phone: _____ Email: _____

Employer: _____ Position: _____

Preferred method of communication:

☐

Cell

☐

Home

☐

Work

☐

Other (please specify) _____

Any distinctive abilities or skills you have that you feel would benefit our organization?

Please indicate days and times available: MON TUES WED THURS FRI SAT SUN

☐ ☐ ☐ ☐ ☐ ☐ ☐

Times Available: From _____ To: _____

Any Physical Limitations? _____

In a case of emergency contact: _____

Thank you for your interest in Diversified Inspirational Youth Center. Without our volunteers our programs would not be conceivable. Whatever opportunity you choose to volunteer for, just know you are making a vast change in the lives of our children and families

Signature _____ Date: _____

**Notification and Authorization to Release Criminal
Information for Volunteer and Employment Purposes**

Notification

The position for which I am being considered requires me to consent to a criminal background check as a condition of employment. This check includes the following: Criminal history reference searches for felony and misdemeanor convictions at the county and federal levels of every jurisdiction where I currently reside or where I have resided during the past 7 years; and sex offender registry searches at the county and federal levels in every jurisdiction where I currently reside or where I have resided.

Authorization

I hereby authorize Diversified Inspirational Youth Center D.I.Y.C to conduct the criminal background check described above. In connection with this, I also authorize the use of law enforcement agencies and/or private background check organizations to assist D.I.Y.C in collecting this information.

I also am aware that records of arrests on pending charges and/or convictions are not an absolute bar to employment. Such information will be used to determine whether the results of the background check reasonably bear on my trustworthiness or my ability to perform the duties of my position in a manner which is safe for D.I.Y.C residents, employees, and other community members.

Position(s) Applied for: _____

Please print (for identification purposes):

Full Legal Name:

First Middle Last

Other Names You Have Used in Past Seven Years: _____

Current Address:

Previous Address (most recent): _____

Addresses in the 7 years prior to completing this authorization: _____

Phone Number: _____

Alternate Number: _____

Date of Birth: _____
Month/Day/Year

Gender: Female ☐ Male: ☐

Social Security Number: _____

Driver's License # _____

Have you ever been convicted of a criminal *offense or have any pending criminal* charges against you?

*This refers only to felonies and misdemeanors; you do not need to include non-criminal traffic violations or municipal ordinance violations.

Yes _____ (provide detail on next page) No _____

To the best of my knowledge, the information provided in this Notice and Authorization and any attachments thereto is accurate and complete. I understand that any falsification or omission of information may disqualify me for this position and/or may serve as grounds for the severance of my employment with D.I.Y.C. By signing below I hereby provide my authorization to D.I.Y.C to conduct a criminal background check and I acknowledge that I have been provided with a summary of my rights under the Fair Credit Reporting Act which is attached. In addition to those rights, I understand that I have a right to appeal an adverse employment decision made by D.I.Y.C based on my background check information within three business days of receipt of such notice and that a determination on my appeal will be made in seven working days from D.I.Y.C receipt of such appeal.

Signature

Date

RELEASE OF LIABILITY

READ CAREFULLY- THIS AFFECTS YOUR LEGAL RIGHTS

In exchange for participation in the activity of Volunteer organized by Diversified Inspirational Youth Center, Non- Profit Organization of P. OBOX 3207, McKinney, Texas, 75070 and/or use if the property, facilities, and services of DIYC I, _____, _____, (Volunteer) agree for myself (if applicable) for the members of my family to the following:

- 1. AGREEMENT TO FOLLOW DIRECTIONS:** I agree to observe and follow all rules and warnings, and further agree to follow and oral instructions or directions given by Diversified Inspirational youth Center, or employees, representatives or agents of D.I.Y.C.
- 2. ASSUMPTIONS OF THE RISKS AND RELEASE:** I recognize that there are certain inherent risks associated with the above described activity and I assume full responsibility for personal injury to myself and (if applicable) my family members, and further release and discharge Diversified Inspirational Youth Center for injury, loss, damage, arising out of my or my family's use of or presence upon the facilities of D.I.Y.C, whether caused by the fault of myself, my family, D.I.Y.C or other third parties.
- 3. INDEMNIFICATION:** I agree to indemnify and defend Diversified Inspirational Youth Center against all claims, causes of action, damages, judgements, costs, or expenses, including attorney fees and other litigation costs, which may in any way arise from my or my family's use of or presence upon the facilities of D.I.Y.C
- 4. FEES:** I agree to pay for all damages to the facilities of D.I.Y.C non-profit organization caused by any negligent, reckless, or willful actions by me or my family.
- 5. APPLICABLE LAW:** Any legal or equitable claim that may arise from participation in the above shall be resolved under Texas law.
- 6. NO DURESS:** I agree and acknowledge that I am under no pressure or duress to sign this Agreement and that I have been given a reasonable opportunity to review it before signing. I further agree and acknowledge that I am free to have my own legal counsel review this Agreement if I so desire.
- 7. PHOTOGRAPH.** I agree to and acknowledge DIYC the use of any and all photographs, audiovisual, video and any other materials taken of me for promotional printed material, educational activities, and displays or for any other use for the benefit of the program.
- 8. ENFORCEABILITY.** The invalidity or unenforceability of any provision of this Agreement, whether standing alone or as applied to a particular occurrence or circumstance, shall not affect the validity or enforceability of any other provision of this Agreement or of any other

applications of such provision, as case may be, and such invalid or unenforceable provision shall be deemed not to be a part of this Agreement.

I plainly agree that this Release is intended to be as general and comprehensive as permitted by the laws of the State of Texas and that this Release shall be administered by and understood in accordance with the laws of the State of Texas. I agree that in the event that any passage or provision of this Release is considered invalid, the enforceability of the remaining provisions of this Release shall not be affected.

By signing below, I agree and acknowledge and committed to enter into this Release and Waiver of Liability willingly and voluntarily.

Signature of Volunteer Date: _____

Signature of DIYC Supervisor Date: _____