



Volunteer Application and Background Check

Last Name: _____ First Name: _____

Address: _____ City & Zip: _____

Cell Phone (_____) _____ - _____ Email Address: _____

In Case of Emergency, Contact: _____
Name Relationship Phone #

Availability:

Morning _____ Afternoon _____ Evening _____ As needed

How did you hear about the CCE volunteer opportunities?

School Community Services Newspaper Friend CCE Programs
 Online _____ Other _____

Are in you in need of volunteer hours? Yes No For: School Community Services How many hours? _____

Describe special skills, interests, and qualifications

<input type="checkbox"/> Visual Arts	<input type="checkbox"/> MS Office	<input type="checkbox"/> Hospitality
<input type="checkbox"/> Media Arts	<input type="checkbox"/> Clerical	<input type="checkbox"/> Social Media
<input type="checkbox"/> Theater	<input type="checkbox"/> Data Entry	<input type="checkbox"/> Ticket sales
<input type="checkbox"/> Photograph / Videography	<input type="checkbox"/> Mailing	
<input type="checkbox"/> Technology / Computer	<input type="checkbox"/> Reception / Visitors	
<input type="checkbox"/> Classroom Assistant	<input type="checkbox"/> Classroom Set Up / Break Down	

To make the best use of your time and skills, please tell us why you would like to volunteer at CCE.

Have you ever been convicted, plead no contest or plead guilty to a felony or misdemeanor? Yes No

if YES, please explain: _____

Volunteer/Work References:

Name: _____ Phone () - _____ - _____

Name: _____ Phone () - _____ - _____

Center for Creative Education a 501(c)(3) Non-Profit Organization.

Offers equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

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Background Investigation

I understand that a background investigation may be conducted and is not limited to, a criminal background check. I have no convictions for child abuse or expungements of such convictions. I authorize Center for Creative Education to request any records of charges or convictions that are contained in any Federal, local or state criminal file concerning me for crimes committed. I release all law enforcement agencies from any liability that may result from any such disclosure made in response to this request. I understand the requested information is for the sole purpose of gathering accurate information for volunteer services at Center for Creative Education. I have read and understand the above and by my signature consent to these statements.

Confidentiality

I understand that as a volunteer, I may become privy to confidential information about Center for Creative Education. I agree to maintain the confidentiality of any information about CCE's business operations, and organization structure. I will not use any confidential information in any manner that would be detrimental to Center for Creative Education.

References

I understand that Center for Creative Education requires information from me to evaluate my qualifications for volunteer service. I authorize and release personal references, employers, and, if necessary, other applicable entities to answer questions in regards to volunteer work, employment, ability, and character.

Application Information

I am a least 16 years old and certify that all information in this application is true and complete. I understand that any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I agree to comply with the rules and regulations of Center for Creative Education.

Applicant's Full Name _____

Applicant's Signature _____ **Date** _____

Parent's or Guardian's Signature _____ **Date** _____

(if Applicant is under 16)

Thank you for willingness to serve the Center for Creative Education in its work with children and youth. In accordance with CCE's Volunteer Policies and Procedures, this form must be completed by anyone who volunteers with CCE, coming into direct contact with minors. We appreciate that you offer to share your time and talent with us. We will contact you once we have received your completed application. Please return completed and signed application as follows:

By E-mail to: volunteer@cceflorida.org or
By Fax: 561-805-9929 or
By Mail to: Center for Creative Education
425 24th St. West Palm Beach, Florida 33407

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