

Process Information (for Office Use)

APPLICATION FOR MEMBERSHIP AND APPOINTMENT OF ADULT VOLUNTEERS



(Please print all information)

Adult Information New Returning

Existing Member #: _____

Salutation: Mr. Miss Ms. Mrs. Other _____

Last Name: _____

First Name: _____

Middle Name: _____

Nickname: _____

Gender: Male Female Birth Date (DD/MM/YYYY): ____/____/____

Address: _____

City: _____ Prov.: _____ Postal Code: _____

E-mail address: _____

Home Phone: (____)____-____

Day Phone: (____)____-____

Religious Affiliation (optional): _____

Health Card # (optional): _____

Occupation: _____

Employer: _____

Emergency Contact Information

Salutation: Mr. Miss Ms. Mrs. Other _____

Last Name: _____

First Name: _____

Middle Name: _____

Street Address: _____

City: _____ Prov.: _____ Postal Code: _____

Phone: (____)____-____

Personal References for new positions (maximum one relative).

As a courtesy, please obtain the permission of your references.

| | | |
|---|------------|---------------|
| 1 | Name | |
| | Home Phone | Daytime Phone |
| 2 | Name | |
| | Home Phone | Daytime Phone |
| 3 | Name | |
| | Home Phone | Daytime Phone |

Group Name: _____

Section Leader or Assistant Leader working with

- | | | |
|--|--|--|
| <input type="checkbox"/> Beavers | <input type="checkbox"/> Wolf Cubs | <input type="checkbox"/> Scouts |
| <input type="checkbox"/> Venturers | <input type="checkbox"/> Rovers | <input type="checkbox"/> SCOUTSabout Jr. |
| <input type="checkbox"/> SCOUTSabout Sr. | <input type="checkbox"/> Extreme Adventure | |

Group Committee Position: _____

Other: _____

Privacy Policy Information

These items relate to the Scouts Canada Privacy Policy, and what we can do with the information you provide. Please review the Privacy Policy at www.scouts.ca before making your choices

- Tick this box if you DO NOT wish to be informed about fundraising and other member benefits not specifically related to your Scouting program.
- Tick this box if you DO wish us to retain your full Scouting record, even if you are no longer an active member.

Throughout the Scouting year leaders, parents and Scouts Canada employees take photos and video of youth and leaders participating in Scouting activities.

These photos are typically kept in group photo albums and displayed on group web sites. Some are also submitted to local newspapers and to Scouts Canada's Communications Services where they are often used in Scouts Canada publications and promotional materials.

Unless otherwise stated below, I consent to the use of images of myself as indicated above.

I do not wish to have images used as indicated above.

Applicants Agreement

- I will subscribe to and actively promote the Mission and Principles of Scouting.
- I agree, as part of my membership requirement, to submit to and provide a police records check clean of any criminal convictions.
- I agree to develop the knowledge and skills necessary for the position within the first year.
- I will abide by the By-law, Policies and Procedures of Scouts Canada.
- I understand that the membership fee for each Scouter paid to Scouts Canada includes the non-refundable fee of *Canyouth Publications* for one year of the *Canadian Leader Magazine* (\$8. yearly value).
- I understand that participation in Scouts Canada is voluntary and there is a degree of risk in some Scouting activities. After carefully considering the risks involved, I will take reasonable precautions to ensure the safety and well being of participants entrusted to me and my personal safety.

Signature _____

Date _____



Volunteer Screening Checklist

Contents of this form are confidential. Once complete, forward original to your council office. DO NOT COPY

Last Name: _____

First Name: _____

Birth Date (DD/MM/YYYY): ____ / ____ / ____ Member No: _____

Scouting Group and Section: _____

Screening Interview—Confidential Interview to be completed by two Scouts Canada approved interviewers. This section to be completed following the interview, not in the presence of the candidate.

Interviewed by:

| Name | Scouting Role | Date |
|------|---------------|------|
| | | |
| | | |

Yes No Uncertain Comments to explain No and Uncertain

| Yes | No | Uncertain | Comments to explain No and Uncertain |
|-----|----|-----------|--|
| | | | Commits to appropriate adult volunteer/participant interaction. |
| | | | Commits to providing challenging programs. |
| | | | Commits to active expression of the Mission, Principles and Promise. |
| | | | Commits to outdoor programming. |
| | | | Commits to personal development. |
| | | | Commits to be a positive role model. |
| | | | Commits to Shared Leadership Approach. |
| | | | Commits to being open, honest and objective. |
| | | | Commits to child protection and safe programming. |

| | | | |
|--|--|--|---|
| | | | Is the candidate acceptable for volunteer service under the guidelines? |
|--|--|--|---|

Reference Checks—each reference must be contacted and checked

| # | Contact Date | Contacted by | How long has the reference known the applicant? | Relationship to the applicant? | Circle one choice | | | |
|---|--------------|--------------|---|--------------------------------|----------------------------------|-----------------------------------|--|---|
| | | | | | Applicant works well with youth? | Applicant works well with adults? | Willing to recommend applicant to Scouts Canada? | Willing to have applicant work one-on-one with own child? |
| 1 | | | | | Yes No Uncertain | Yes No Uncertain | Yes No Uncertain | Yes No Uncertain |
| 2 | | | | | Yes No Uncertain | Yes No Uncertain | Yes No Uncertain | Yes No Uncertain |
| 3 | | | | | Yes No Uncertain | Yes No Uncertain | Yes No Uncertain | Yes No Uncertain |

Comments to explain No and Uncertain Responses:

Group Committee/Group Commissioner Approval

I confirm that the above named person has been fully screened as per Scouts Canada's *Adult Volunteer Screening Procedure* and is acceptable to work with youth as an adult volunteer member.

Signed: _____ Date: _____

Council Executive Director

I confirm that the *Adult Volunteer Screening Procedure* has been completed for the above named person, that a clean Police Record Check is on file and this applicant is acceptable for membership with Scouts Canada.

Signed: _____ Date: _____