

			Date:						
You can submit this completed form via: e- Silver Key Senior Services, Volunteer Enga If you have any questions, please contact	agement Dept, 1625 S. Murray Blvd								
Are you a: 🗌 New volunteer to Sil	ver Key? OR 🗌 Returning vo	olunteer to Silver Key?							
Are you a current client of Silver Ke	ey? 🗌 Yes 🗌 No 🛛 If yes , w	hich department?							
Are you a past client of Silver Key?	Yes No								
Are you a Veteran? 🗌 Yes 🗌 N	lo								
Are you a spouse of a Veteran? [
How did you hear about voluntee									
Volunteer Information – Informat	ion provided in this section is use	ed for the application process, in	cluding a background check.						
Legal Name:		Primary Phone:							
Address:		E-mail:							
City/State/Zip:		Date of Birth: Gender: M F For positions that require driving on behalf of Silver Key, volunteers must be age 21 or older.							
Length of time living at address (m	o/yr):								
If less than 5 years, provide previous a	ddress:								
		Driver License #							
City/State/Zip: Please note that you will be asked to provide your Social Security number after the interview process for a criminal		Driver License issuing state: 🗌 CO OR 📃 Other							
		Driver License expiration date:							
background check.		For some positions, you may be asked to provide a copy of your vehicle insurance and driver's license after the interview process and on a regular and/or periodic basis.							
Emergency Contact – Who can we	contact in case of an emergency	/?							
Name:		Phone:	Relation:						
Volunteer Interest and Availabili	ty — What areas of volunteering	are you interested in? (Check al	l that apply)						
Provide Meals:	<u>Client Support:</u>	<u>Office/Admin Support</u>	<u>Veterans Supporting</u>						
Home Delivery of Meals	Food Pantry Client	Admin/Reception	<u>Veterans:</u> Home Delivery of Meals						
Connections Café Lunch Service	Support Admin/Reception	Resource Development A	dmin Reserve & Ride Driver						
Food Preparation	Materials Support	Professional Support	Veteran Client Support						
Provide Rides:	Food Pantry Materials	Project and Event Suppor							
Reserve & Ride Driver	Handling Thrift Store*								
Tall us what days and times you a		aturday apportunities are lin	nitad to the Thrift Store):						
Tell us what days and times you are available to volunteer (*Saturday opportunities are limited to the Thrift Store): Mon Tues Wed Thurs Fri Sat*									
(<u>)</u>		(<u>)</u> (<u>)</u>	<u>()</u>						
PLEASE NOTE: Silver Key has a separate application form for supervised/limited exposure volunteer positions including:									
groups, one-time, community service, and minors. Contact the Volunteer Engagement Dept for availability and applications.									



Education/Skills	
What is the highest level of education you have achieved?	e 🗌 Higher
Please rate your computer skills: Internet Research None OK Good Microsoft Office None OK Good	Great Great
Tell us about any other language(s) you understand/speak/read Language: Understand Speak Language: Understand Speak	Read Write
Volunteer / Employment History – What other businesses/organi	izations have you volunteered or worked for?
Business/Organization:	Phone:
Address:	
City/State/Zip:	
Job Title:	
From: To: Reason for Leaving:	
Responsibilities:	
May we contact for a reference? Yes No	
Business/Organization:	Phone:
Address:	
City/State/Zip:	
Job Title:	
From: To: Reason for Leaving:	
Responsibilities:	
May we contact for a reference? Yes No	
Business/Organization:	Phone:
Address:	
City/State/Zip:	
Job Title:	
From: To: Reason for Leaving:	
Responsibilities:	
May we contact for a reference? Yes No	



Declining any of the below information needed may disqualify you from further consideration regarding volunteering.

Disclosure

As part of our background investigation process, we may obtain consumer reports or prepare an investigative consumer report. The investigative consumer report may consist of contacting all supplied prior employers to verify your employment history. It may also include, but not be limited to, criminal history reports and driving history records. It is rare that Silver Key will obtain a credit report and the volunteer will be advised under which conditions this would be necessary. Under the provisions of the Fair Credit Reporting Act, before we can seek such reports, we must have your written permission to obtain the information. You have the right, upon written request, to a complete and accurate disclosure of the nature and scope of the investigation. You are also entitled to a copy of your Rights under the Fair Credit Reporting Act, go to www.consumerfinance.gov/learnmore.

Background Check Release

Advisement

Older adults are a potentially vulnerable, high-risk group. Silver Key Senior Services asks that you provide authorization for a criminal record check prior to your potential volunteer placement. The criminal record check is conducted via a secure website. It is returned electronically to the Silver Key Volunteer Engagement department and becomes a part of your volunteer record. **Acknowledgement**

I have read the above statement and I understand Silver Key's requirement for a criminal record check prior to further consideration of my application for volunteer placement. I understand if I choose to participate in the VA Choose Home Veteran Volunteer program, I will also be required to undergo a fingerprint check. I understand that I am being asked to voluntarily provide information including my social security number. I further understand that failure to provide the information will

disqualify me from further consideration concerning the volunteer position for which I might apply.

I accept I decline

Drug and Alcohol Testing

I understand that all volunteer positions that involve driving on behalf of Silver Key and all VA Choose Home Veteran Volunteers will require a drug and alcohol test prior to placement, per the Department of Transportation (CDOT) regulations and/or insurance requirements. Volunteers who meet these criteria will be subject to periodic random drug testing. (Federal Transit Administration (FTA) regulation 49 CFR Part 655) I understand that failure to authorize and pass a required drug and alcohol test will disqualify me from further consideration concerning the volunteer position for which I might apply.

I accept

I decline

Driving Record Release

Driving records may be obtained as part of Silver Key's evaluation of my volunteer application. I understand a motor vehicle records check is required for all positions that involve driving on behalf of Silver Key. I understand that I am being asked to voluntarily provide this authorization and that failure to provide authorization may disqualify me from further consideration concerning the volunteer position for which I might apply.

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🗌 I decline

Photo Release

I hereby agree to allow Silver Key to take photographs and/or videos of me while volunteering for Silver Key; I grant ownership of any such images to Silver Key and specifically release any rights or claims to same. These images may be used for advertising, communication, social media postings, and/or commercial purposes. If you decline, you are responsible for letting the photographer/videographer know that you would not like your photo taken or be shown in the video **before** the image is taken.

I accept I decline



Release of Liability

I agree not to hold Silver Key Senior Services, Inc. liable in the case of injury or accident.

l accept

ot 🔄 I decline

Confidentiality Statements – Your commitment to Silver Key and its clients

We have a policy of strict confidentiality. Names, specific conditions, and/or other personal details are to be held in strict confidence. You may share the stories, the successes, and the warmth – but please leave out the personal details. This includes detailed information about clients, other volunteers, donors and staff.

Agreement

I assert that the information provided above and on previous page(s) is accurate to the best of my knowledge and I agree with the terms stated herein.

I understand that declining <u>any</u> of the above information needed may disqualify me from further consideration concerning the volunteer position for which I am applying for.

Signature of Applicant

Typed or Printed Name of Applicant

Date