



College/University \_\_\_\_\_  
Name of school \_\_\_\_\_ City, ST \_\_\_\_\_ Major / Field of study \_\_\_\_\_

Community/Trade School \_\_\_\_\_  
Name of school \_\_\_\_\_ City, ST \_\_\_\_\_ Major / Field of study \_\_\_\_\_

Other  
skills/training/experience \_\_\_\_\_

A-WOW INTERNATIONAL Girls Leadership Initiative

REFERENCES Please list two references not related to you:

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Alt. Phone ( ) \_\_\_\_\_

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Phone ( ) \_\_\_\_\_ Alt. Phone ( ) \_\_\_\_\_

CRIMINAL BACKGROUND The organization may consider the nature, date and circumstances of an offense, as well as whether the offense is relevant to the duties of the position applied for. Have you ever been convicted for a crime?  Yes  No Check "No" for 1) convictions related to personal marijuana use that are more than two years old; 2) convictions that have been sealed, expunged or legally eradicated, and 3) misdemeanor convictions for which probation was completed and the case was dismissed.

Are you currently out on bail, the subject of a current warrant for arrest or released on your own recognizance pending trial?  Yes  No

If yes to either of the above questions, please briefly describe the nature of the crime(s), the date and place of conviction and the legal disposition of the case:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

AVAILABILITY  Day (9am – 5pm)  Evening (5pm – 9pm)  Weekends  Seasonal  On Call  
Only What day(s) of the week are you able to volunteer? \_\_\_\_\_

VOLUNTEER OPPORTUNITIES

VOLUNTEER AGREEMENT & AUTHORIZATION I understand the importance of this volunteer commitment and have answered the application questions honestly and to the best of my knowledge. I understand that falsified information on this application shall be grounds for dismissal from the volunteer program. I give A-WOW Inc. permission to verify the information I have provided in this application. Furthermore, as a volunteer for A-WOW Inc., I, the undersigned, exempt and relieve A-WOW Inc., and their directors, trustees, employees and staff and its affiliates from liability for personal

injury, property damage or wrongful death caused by negligence. I understand that A-WOW Inc, does not require my participation as a volunteer. I hereby release and discharge A-WOW Inc. and their directors, trustees, employees and staff and affiliates from all claims and liability including all claims and liabilities from negligence arising from my participation as a volunteer. I further agree to hold harmless and indemnify A-WOW Inc, and its agents for all defense costs, including attorney's fees, and any other costs resulting in connection with my participation as a volunteer for A-WOW Inc. I understand my role as a volunteer for A-WOW International Girls Leadership Initiative / A-WOW Inc. I agree to follow their guidelines, policies and procedures as presented to me in the orientation, interview and training. If I do not follow these guidelines my volunteer service will end.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicants under the age of 18 years old must have the following section completed by a parent or legal guardian:

I, \_\_\_\_\_, represent to A-WOW Inc that I am the parent/legal guardian of the Applicant whose signature appears above. I have read and understand the above Volunteer Agreement & Authorization and hereby give my consent and permission for my child to participate as a volunteer for A-WOW Inc. I, On behalf of the above Applicant, I agree and accept all of the provisions of the foregoing Volunteer Agreement & Authorization.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_