



**BOYS & GIRLS CLUBS  
OF HUDSON COUNTY**

• ADMINISTRATIVE OFFICES: 225 MORRIS BOULEVARD • JERSEY CITY, NJ 07302 • www.bgchc.org • T: 201.333.4100 • F: 201.333.5640

# ADULT VOLUNTEER APPLICATION

(Please Print)

Name: \_\_\_\_\_ Phone (Home): \_\_\_\_\_  
 Address: \_\_\_\_\_ Phone (Work): \_\_\_\_\_  
 City: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip: \_\_\_\_\_ Current Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**At which location would you like to volunteer?**

- Robert T. Williams, Jr. Unit (Jersey City)       Edward A. Dalton Unit (Hoboken)

**Are you interested in participating as a long- or limited-term weekly volunteer?    Yes    No**

If yes, what area(s) of programming interest you most?

- Education/Tutoring                       Career Development                       College Preparation  
 Fine Arts/Crafts                               Technology/Computers                      Music/Performing Arts  
 Sports/Fitness                                   Teen Programs                                   Admin/Development  
 Other Specialty \_\_\_\_\_

**Please fill in the days and times that you are available to volunteer.\***

	Monday	Tuesday	Wednesday	Thursday	Friday
Times					

*\*Volunteer opportunities exist after 6:30 pm only with teens. Clubs are closed on weekends.*

Total number of hours each week you are available to volunteer: \_\_\_\_\_

Estimated length of commitment (e.g. 3 months, 6 months, indefinitely, etc.): \_\_\_\_\_

**List any special skills, areas of knowledge and/or experience (including non-English languages):**

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

**List any previous volunteer experiences (include name of organization) or experience working with youth.**

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

---

**What is your occupation?** \_\_\_\_\_

Name and address of employer: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

**Are you a College/University student?    Yes    No**

Name & location of school: \_\_\_\_\_

\_\_\_\_\_

**Are you volunteering as part of a Service-Learning course or program?    Yes    No**

If yes, please provide the following:    Course title: \_\_\_\_\_

Instructor's name: \_\_\_\_\_

Instructor's phone # or email address: \_\_\_\_\_

---

**Please provide two personal references.**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

---

**Emergency Contact:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

---

**How did you learn of Boys & Girls Clubs of Hudson County?**

---

**Are you a former member of a Boys & Girls Club?    Yes    No**

If yes, what was the name and location of the club?

---

**Are you volunteering as part of a corporate/community program or organization?    Yes    No**

If yes, what is the name of the program/organization?

---

*NOTE: Providing the following information is strictly voluntary and confidential. It allows us to better assess our community outreach and is not used in any manner to make decisions or judgments regarding a prospective volunteer.*

**Gender:**     Female     Male

**Race/Ethnicity:**

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Asian/Pacific Islander       | <input type="checkbox"/> Black, non-Hispanic | <input type="checkbox"/> Native American/Native Alaskan |
| <input type="checkbox"/> South Asian                  | <input type="checkbox"/> Hispanic/Latino     | <input type="checkbox"/> Mixed-Ethnicity                |
| <input type="checkbox"/> Middle Eastern/North African | <input type="checkbox"/> White, non-Hispanic | <input type="checkbox"/> Other _____                    |

---

**BY SIGNING THIS DOCUMENT I AM AWARE THAT BOYS & GIRLS CLUBS OF HUDSON COUNTY MAY CONTACT THE ABOVE LISTED REFERENCES. I ALSO AGREE TO SUBMIT MY FINGERPRINTS, IF REQUIRED, FOR THE PURPOSE OF A BACKGROUND CHECK AND WILL NOT ENGAGE IN ANY UNSUPERVISED VOLUNTEER ACTIVITIES PRIOR TO THE COMPLETION OF THE CHECK.**

Applicant Signature:

Date:

---

**PLEASE RETURN COMPLETED APPLICATIONS TO:**

VOLUNTEER & CORPORATE OUTREACH MANAGER  
BOYS AND GIRLS CLUBS OF HUDSON COUNTY  
225 MORRIS BOULEVARD  
JERSEY CITY, NJ 07302  
FAX: (201) 333-5640