



Rotary District 5520 Youth Exchange Volunteer Application / Affidavit

CBC / VeriFYI _____ Date _____

Personal Information / Volunteer					
Full Name: (Last) _____ (First) _____ (Middle) _____			Date _____		
Address: _____					
City: _____				State _____	Zip _____
Social Security No (REQUIRED): _____					Gender: M <input type="checkbox"/> / F <input type="checkbox"/>
Ethnicity: African Amer. Anglo Asian Hispanic Native Amer. Other (CIRCLE ONE) _____					
Home # () _____		Business # () _____		Fax # () _____ Cell # () _____	
Date of Birth (yyyy/mm/dd): _____		Email address _____		Drivers License (only upon request): _____	
Foreign Language _____		Country of birth: _____		State DL issued _____	
Are you a Rotary Member?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, club name and District # Dated joined: _____	
Organizations / clubs?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, list all past & current _____	
Have you ever been convicted of or plead guilty to any crime(s)?		YES <input type="checkbox"/>	NO <input type="checkbox"/>	If yes, describe in full. Include date(s) of crime(s) and in which country and state each took place. (Attach separate sheet if necessary) _____	
Have you ever been subject to any court order involving any sexual, physical or verbal abuse including but not limited to any domestic violence or civil harassment injunction or protective order		YES <input type="checkbox"/>	NO <input type="checkbox"/>	_____ _____ _____ _____	

Personal References		
<i>Please list three personal references (not relatives and not more than one former or current Rotarian)</i>		
Full Name: _____	Relationship: _____	
Address, City State, Zip _____	Phone: () _____	
Full Name: _____	Relationship: _____	
Address, City State, Zip _____	Phone: () _____	
Full Name: _____	Relationship: _____	
Address, City State, Zip _____	Phone: () _____	

Employment History (5 years – please attach additional sheets, if necessary)		
Current:	Phone: () _____	
Address, City State, Zip _____	Supervisor: _____	
Previous:	Phone: () _____	
Address, City State, Zip _____	Supervisor: _____	



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Applicant Name (continued from page 1)

Prior Residence: (If less than five years at current residence)

Prior Address:		How Long at this address?	
City	State	Zip	

Have you held a Youth Exchange position in the past?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	Position(s):	Date(s) held:
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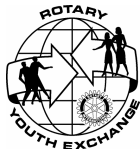
What position are you applying for?

Volunteer History (5 years – please attach additional sheets, if necessary)

Organization Name		Director's Name		
Address		City	State	Zip
Telephone		Position	Dates Held	
Organization Name		Director's Name		
Address		City	State	Zip
Telephone		Position	Dates Held	

Qualifications and Training

What qualifications and or training do you have relevant to Youth Exchange or this position? **Please describe in full:**



Rotary District 5520

Youth Exchange Affidavit

Volunteer

Rotary District 5520 is committed to creating and maintaining the safest possible environment for all participants in Rotary activities. It is the duty of all Rotarians, Rotarians' spouses, partners, Host Families and any other volunteers to safeguard to the best of their ability the welfare of and to prevent the physical, sexual, or emotional abuse of children and young people with whom they come into contact.

WAIVER / CONSENT/ RELEASE

I certify that all of the statements in this affidavit, and in any attachments hereto, are true and correct to the best of my knowledge. I also certify that I have not withheld any information that would affect this affidavit unfavorably, if disclosed. I understand that any omission of facts or misrepresentation will result in my elimination from consideration for any volunteer position with the **Rotary District 5520** Youth Exchange program or its affiliates. I further certify that I understand that **Rotary District 5520** Youth Exchange program's intent is to deny a position to anyone convicted of a crime of violence or a crime against another person.

I hereby authorize **Rotary District 5520** Youth Exchange, VERIFYI and/or its Service Provider to request and receive any and all background information about/concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the **Fair Credit Reporting Act, 15 U.S.C 1681**, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers. The Fair Credit Reporting Act states that any access to credit history must be disclosed to the applicant. **The background check program verifies the Name, SS# (upon request) and DOB** with the Credit Bureau Equifax, therefore the Fair Credit Reporting Act rules apply. **This search will NOT access or disclose ANY financial history or personal information not applicable to the criminal history report.** I understand that this information will be used to determine my eligibility for a volunteer position with the **Rotary District 5520** Youth Exchange program. I also understand that as long as I remain a volunteer with **Rotary District 5520** Youth Exchange, the criminal history records check may be repeated as deemed necessary. I understand that I will have an opportunity to review the criminal history report and that there is a procedure available for clarification, if I dispute the record as received.

I waive any right to assert that such an investigation or request constitutes an invasion of my privacy. I recognize that such inquiries are in the interest of all persons involved in the **Rotary District 5520** Youth Exchange program, and I fully consent to such investigations.

IN CONSIDERATION of my acceptance and participation in the Youth Exchange program, I, to the full extent permitted by law, hereby release and agree to save, hold harmless and indemnify, all members, officers, directors, committee members and employees of the participating Rotary Clubs and Districts, and of Rotary International ("Indemnitees"), from any or all liability for any loss, property damage, personal injury or death, including any such liability which may arise out of the negligence of any of the Indemnitees, which may be suffered or claimed by me as a result of an investigation of my background in connection with this affidavit or participation in the Youth Exchange program.

I further agree to conform to the rules, regulations, and policies of Rotary International, the **Rotary District 5520** Youth Exchange program and its affiliates, and understand that my service can be modified or terminated, with or without notice or cause, at any time, at the option of either the **Rotary District 5520** Youth Exchange program or its affiliates, or at my option. I understand and agree that the **Rotary District 5520** Youth Exchange program or its affiliates may, in their sole discretion, decline to accept my application for volunteer services with or without cause.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE AFFIDAVIT, WAIVER, CONSENT AND RELEASE, AND THAT I SIGN THIS FORM VOLUNTARILY.

Signature of Applicant (Volunteer)

Print (Applicant-Volunteer name)

Date