



American Red Cross

Camden County Chapter

5425 Route 70 West
Pennsauken, New Jersey 08109
856/365-7100
FAX 856/365-0187
www.camdenredcross.org

VOLUNTEER APPLICATION

Please complete application and initiate background check (see attached instructions).

Name: _____
Last Middle Initial First

Address: _____
Street City State Zip

Phone Number: _____ Best time to contact you? _____

Business Phone: _____ E-mail Address: _____

Date of Birth: _____ Gender: _____

Ethnicity: _____

Employer's Name: _____

Employer's Address: _____

Are you a licensed driver? Yes No Driver Licenses number/state: _____

Are you a student? (Check one) Yes No Full-time Part-time

Name of school/college: _____

Grade/credits completed: _____ Diploma/Degree and Date Received: _____

List previous experiences (volunteer, paid, or educational) that would be helpful in working with people.

Activity	Organization	Date

List any skills, hobbies, or interests you have that may be helpful in your volunteer work.

Do you speak, write or read any other language beside English, please list the language(s).

Please give the name of any person(s) we should notify in an event of emergency:

Name _____
Address _____

Phone _____
Relationship _____

Name _____
Address _____

Phone _____
Relationship _____

Please list two personal/profession references:

Name _____
Address _____

Phone _____

Name _____
Address _____

Phone _____

Do you hold any American Red Cross certification? Yes No

If so, please list:

Please **number** the American Red Cross service(s) **in order of preference** where you feel you would like to volunteer & be trained in (**1 being the highest of interest**):

Healthy & Safety Helping at health fairs Filing & Light Typing

Instructing:

Baby-sitting/Childcare CPR & First Aid Water Safety

Lifeline Outreach Program

Disaster Services Disaster Action Team Fire Safety Education Instructor

Blood Services Community Blood Drives Blood Donor Center Assisting with Blood Drives
 Volunteer Driver

Administration Clerical (data entry, filing & answering the switch board) Special Events
 Assisting with mailings Public Relations

Availability Daytime Evening Weekdays Weekends Daily Weekly Monthly

What Hours? _____

Would you be willing to serve time of disaster? Yes No

Please give your reason for volunteering at the American Red Cross?

I understand that the above information is voluntary supplied and may be used and disclosed for American Red Cross purposes and that as a Red Cross volunteer, I will not be paid for my services.

Date

Signature

If Minor, Parental Consent Signature

Together, We Prepare.



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Dear Volunteers,

The Camden County American Red Cross would like to share with you some important new details about the National Red Cross Background Checking Initiative that is being implemented nationwide. With Homeland Security concerns, agency trustworthiness and desire for transparency as a national emergency response organization, the Board of Governors voted overwhelmingly to extend our current Disaster-related background checks to the entire organization.

Initially, background checks were limited to those persons who were enrolled in the Disaster Services Human Resources system. As of July 2006, all Red Cross employees and volunteers must undergo background checks through a single vendor. If you are a candidate for volunteering, an applicant for employment or a Red Cross volunteer or staff member who has never received a Red Cross background check, ***you must complete a background check in order to volunteer.***

To initiate the process:

- 1). Logon to: www.mybackgroundcheck.com and click on the American Red Cross box
- 2). Click on the black box: "Request a Background Check"
- 3). Select the state of NJ
- 4). Select the Camden County Chapter
- 5). Read "The Process" page and then click the box at the bottom of the page to get started.
- 6). Click on what is your role for this background check and then click on "continue".
- 7). Read the "Consent Statement" and click "I agree" on the blue bar.
- 8). Read "Authorization for Background Check" and click on "I agree" on the blue bar.
- 9). Click on "I Accept"
- 10). Fill out the questionnaire to complete the process.

If you do not have access to a computer, please call me (856) 365-7100 ext. 231.

Once your name is submitted to Choicepoint, our Chapter's unit administrator, Jacqueline Jimenez, will be notified and she will confirm with Choicepoint that you are a Chapter volunteer. Results will be sent to you and the Chapter. This background check does not include a credit check or other financial information; it is strictly a background check for criminal offenses that occurred within the last seven years. The data is maintained on a secured site and your social security number is not retained. A new National Background Check Office is staffed with professionals who can address your questions 1-800-507-3960, Monday – Friday, 8:00 a.m. to 7:00 p.m. ET.) If you have any technical questions about the website, please contact the vendor at 1-800-503-2364 ext. 406.

Thanks for your cooperation with this process that has been developed to better protect our clients, customers and organization in these difficult times.

