

Revised 11/16/2018

Return to: 12 Coventry Drive, Massena, NY 13662

Lifted Out of Poverty, Inc

Volunteer Information

Volunteers of Lifted Out of Poverty, Inc (LOOP) are required to go through our screening process. This process will give you an idea of how the club functions as well as help us understand your reasons for volunteering. LOOP serves students in grades 9-12 of the Massena Central School District. Since this is a mentoring program meant to provide these young women with role models, they will also look up to you as a role model. This volunteer process includes:

1. Complete the application and other required forms including a background check.
2. Meet at the facility for a tour, an explanation of our mission, to discuss your areas of interest on this application and understand procedures relative to your interest.
3. Based on your area of interest, there will be additional steps which will be discussed at our meeting.

Name: _____ Date of Birth _____

Address:

Street: _____ City: _____ State: _____

Zip _____

How long at this address: _____

Primary Phone _____ Cell phone: _____

Do you accept texts: Y / N

Email address: _____

Referred by: _____ Employer: _____

Employer phone: _____ Do you have reliable transportation: Y / N

Have you ever been convicted of a crime? Y / N

Explain: _____

Have you ever been indicted for abuse, neglect or maltreatment against children? Y / N

Explain:

Reason for volunteering: community service college student

other: _____

Availability: M T W TH F S

I am willing to volunteer in the following areas:

- ☐ Transporting mentees on field trips and/or home after tutoring
- ☐ Tutoring: (subjects)_____
- ☐ Organizing or Chaperone field trips or in club events
- ☐ Working at fundraising events
- ☐ Fundraising "behind the scenes" work ex: making phone calls, sending mail, etc
- ☐ Computer skills
- ☐ Serving on a committee
- ☐ Providing specialized training for mentees. Describe:_____
- ☐ Provide resources for the club. Describe:_____
- ☐ Other: Please explain _____

I, _____, hereby give my authorization to release any information concerning me to Lifted Out of Poverty, Inc. All of the information above is true and correct to the best of my knowledge.

Signature: _____ Date: _____

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I, _____, residing at _____ give
consent for a criminal background check. My date of birth is _____ and
my driver's license number is _____. I give the _____
police department permission to release any findings to Lifted out of Poverty, located at 47
Perkins Road, Massena, NY 13662.

Signature

Date