

VOLUNTEER FORM

PERSONAL INFORMATION

Full Name: _____

City: _____ State: _____ Zip Code: _____

Number: _____ Email: _____

Emergency Contact: _____ Relationship: _____

Emergency Phone: _____

Volunteer Interest & Availability

Areas of Interest (Check all that apply):

Mentorship (1:1 or Group):

Life Skills Facilitation:

Event Support:

Administrative Support:

Fundraising and Support:

Outreach and Community Engagement:

Availability

Days Available: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Time: Morning Afternoon Evening

Start Date: _____

Hours per week (estimated): _____

EXPERIENCE & QUALIFICATIONS

Current Occupation/Employer: _____

Relevant Experience (youth work, mentoring, teaching, etc):

Skills (Check all that apply):

Leadership:

Communication:

Conflict Resolution:

Teaching/ Facilitation:

Counseling/Support:

Event Planning:

Administrative:

Other: _____

Certifications (if applicable):

CPR/First Aid:

Teaching Certification:

Counseling/Coaching Certification:

Other: _____

BACKGROUND & SCREENING

Have you ever been convicted of a felony or misdemeanor? Yes No

If yes, please explain: _____

Are you willing to complete a background check? Yes No

Have you ever been involved in any situation involving child abuse, neglect, or misconduct? Yes No

If yes, please explain: _____

REFERENCES (REQUIRED)

Reference 1:

Full Name: _____

Number: _____ Email: _____

Relationship: _____

Reference 2:

Full Name: _____

Number: _____ Email: _____

Relationship: _____

PERSONAL STATEMENT

1. Why do you want to volunteer with MAGIC?

2. What does “Heal Identity, Build Community, Empower Potential” mean to you?

3. Describe your approach to working with youth from diverse or underserved backgrounds.

YOUTH PROTECTION & ETHICAL AGREEMENT

By intializing below, I agree to the following:

- I will maintain appropriate boundaries with youth participants.
- I will not engage in ant form of abuse, neglect, or exploitation.
- I will report any concerns related to youth safety immediatly.
- I will not be alone with a minor in unauthorized settings.
- I will not communicate with participants outside approved channels.

Signature: _____

CODE OF CONDUCT

I agree to:

- Represent MAGIC's values: Identity, Community, Growth, Accountability, Excellence
- Treat all participants with dignity and respect
- Avoid discrimination based on race, gender, religion, or background
- Maintain professionalism at all times
- Follow all program guidelines and staff direction

Signature: _____

LIABILITY WAIVER & RELEASE

I understand that participation as a volunteer with MAGIC may involve certain risks. I voluntarily assume all responsibility for any risks associated with my participation. I hereby release and hold harmless MAGIC, its officers, staff, partners, and affiliates from any and all liability, claims, or damages arising from my participation, except in cases of gross negligence or willful misconduct.

Signature: _____

MEDIA & PHOTO RELEASE

I authorize MAGIC to use photographs, video recordings, audio recordings, and/or my likeness for promotional, educational, and marketing materials related to the organization.

PLEASE CIRCLE: YES NO

Signature: _____

CONFIDENTIALITY AGREEMENT

I agree to:

- Protect the confidentiality of all student and family information.
- Not share personal or sensitive information outside authorized channels.
- Comply with all applicable privacy laws and program policies.

Signature: _____

PHILANTHROPIC ALIGNMENT

MAGIC is a mission-driven nonprofit. Please indicate your interest in supporting beyond volunteerism:

Fundraising Support

Donor Engagement

Corporate Partnerships

Personal Giving

Advocacy and Awareness

CERTIFICATION & SIGNATURE

I certify that all information provided is true and complete to the best of my knowledge. I understand that false information may result in denial or termination of volunteer service. I agree to abide by all MAGIC policies, procedures, and expectations.

Signature: _____

Printed Name: _____

Date: _____

FOR INTERNAL USE ONLY

Application Reviewed By: _____

Background Check Status: Cleared Pending Denied

Interview Completed: Yes No

Approved Role: _____

Start Date: _____