



**Allendale**  
CHARTER TOWNSHIP

# **TEEN** **VOLUNTEER** **APPLICATION**

Note: This form is for teens, ages 14 to 17. Teens must be at least 14 years old on the date of application.

**ALLENDALE CHARTER TOWNSHIP**  
ATTN: Human Resources Department  
6676 Lake Michigan Drive  
Allendale, MI 49401  
Phone: (616) 895-6295

**We are an Equal Opportunity Employer and committed to excellence through diversity.**

Please complete each line by printing in blue ink or typing. The application must be fully completed to be considered for volunteer placement. **Please note we do not currently offer volunteer opportunities to individuals seeking court-ordered community service.**

## **PERSONAL INFORMATION**

Last Name	First Name	M.I.
_____		
Street Address and/or Mailing Address		
_____		
City	State	Zip Code
_____		
Home Telephone Number:	_____	Preferred Contact No.: <input type="checkbox"/> Home <input type="checkbox"/> Cellular
Cellular Telephone Number:	_____	Preferred Contact Time: _____
Email Address: _____		

## **GENERAL INFORMATION**

Are you 14 years of age or older?  Yes  No **(WORK PERMIT REQUIRED FOR ALL VOLUNTEERS UNDER 18.)**

School Currently Attending: \_\_\_\_\_

Current Grade:  8th  9th  10th  11th  12th

## **VOLUNTEER POSITION**

Identify the volunteer opportunities that interest you:

Library  Township Events  Library and Township Events  
(4<sup>th</sup> of July, Movies in the Park, Concerts in the Park, etc.)

If you marked Library above, please identify the possible assignments that interest you most:

Shelving and straightening of library materials  
 Dusting shelves  
 Cleaning puzzles and toys  
 Helping with inventory of supplies and organizing supplies  
 Indoor and outdoor cleaning / watering indoor plants  
 Hospitality (greeting and welcoming patrons)  
 Creating scrap paper and craft preparation  
 Assisting with special events at the library  
 Shredding documents

## **AVAILABILITY**

When can you begin volunteering? \_\_\_\_\_

What is your availability?  Regular Shifts     Regular Shifts + Special Events     Special Events Only

What is your preferred number of volunteer hours per week? \_\_\_\_\_

Please indicate the days and times that best fit into your schedule for volunteering:

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
MORNING							
AFTERNOON							
EVENING							

Due to state law, teen volunteers cannot be scheduled more than 6 days in 1 week, or during school hours. MCL 409.111.

Volunteer candidates for the Allendale Charter Township's Library are generally asked to commit to a minimum of 6 months of continuous service for each volunteer period. If selected as a Library volunteer, can you make this commitment?

Yes     No     Not Applicable. I do not wish to volunteer in the Library.

**Notwithstanding the foregoing, volunteers serve at the will of the Township and may be discharged, with or without cause and with or without notice, at any time.**

### GENERAL SKILLS AND QUALIFICATIONS

What special interests, skills, or qualifications do you have that may help us match you with the best volunteer assignment? *(Attach additional pages if necessary.)*

### PREVIOUS VOLUNTEER EXPERIENCE

Please summarize your previous volunteer experience. *(Attach additional pages if necessary.)*

### PURPOSE FOR VOLUNTEERING

Why are you interested in volunteering for the Allendale Charter Township? *(Attach additional pages if necessary.)*

Is this an assignment for school?  Yes     No

If your answer to the question above is "yes", please answer the following:

Number of hours you are required to complete: \_\_\_\_\_

Deadline to complete hours for assignment/project: \_\_\_\_\_

Course or organization in which assignment was assigned: \_\_\_\_\_

Note: Please keep in mind that the Township cannot guarantee to have enough volunteer hours available for you to complete your project.

### REFERENCES

Please identify two individuals, who are not related to you, who have knowledge of your experience, qualifications, and/or character. **Employment, school, previous volunteer references are preferred.**

<b>1</b>	Name:	Phone:
	Relationship:	Email:
<b>2</b>	Name:	Phone:
	Relationship:	Email:

**CONVICTIONS**

Have you ever been convicted of, or pleaded guilty or nolo contendere to, a crime that has not been expunged or pardoned, other than a minor traffic violation?  Yes  No

Note: Convictions are not an automatic bar to volunteer placement but are reviewed in relation to the duties you might perform. This information will be used only for volunteer-related purposes and only to the extent permitted by law. We do not currently offer volunteer opportunities to individuals seeking court-ordered community service. Untruthful answers will result in the candidate no longer being considered.

**EMERGENCY CONTACTS**

Emergency Contact #1:	Relationship:
Home Phone:	Work Phone:
Emergency Contact #2:	Relationship:
Home Phone:	Work Phone:

**CERTIFICATION AND ACKNOWLEDGMENT**

I certify that the statements made in this volunteer application are true and correct and have been given voluntarily. I understand that this information may be disclosed to any party with legal and proper interest, and I release the Allendale Charter Township (the "**Township**") from any liability for supplying such information.

I understand that the Township reserves the right to screen volunteers, to accept or reject any applications, and to place applicants in specific locations and positions based on the needs of the Township. I also understand that volunteer opportunities are available on a limited basis.

I understand that I will not be paid for my services as a volunteer, and I am giving my time freely to the Township. I also understand that I am not entitled to workers' compensation or group benefits in the event of an injury.

I understand that the Township reserves the right to evaluate volunteer performance and the right to terminate my volunteer service at any time, for any reason and with or without notice.

**APPLICANT:**

\_\_\_\_\_ (Print Name)  
 \_\_\_\_\_ (Signature)  
 \_\_\_\_\_ (Date)

**PARENT/LEGAL GUARDIAN:**

\_\_\_\_\_ (Print Name)  
 \_\_\_\_\_ (Signature)  
 \_\_\_\_\_ (Date)

**Parent/Legal Guardian signature is required.**

<p><b>For Office Use Only:</b></p> <p>Received by: _____</p> <p>Date: _____</p>
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## Consent to Background Check and Release

As a present or prospective volunteer of the Allendale Charter Township (the “Township”), I understand it is the Township’s policy to secure criminal background information as part of the screening process, using the information provided below:

Name: \_\_\_\_\_  
Last First M.I.

Aliases: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Date of Birth: \_\_\_\_\_ Sex:  Male  
 Female

Social Security Number: \_\_\_\_\_

I authorize the Township to make inquiries as to my employment, education, experience, and character and to confirm that all statements made on this application are true. I authorize the Township to obtain information about my criminal history record, which may include information about arrests, convictions, plea bargains, and deferred adjudications. I acknowledge that the Township may use this and other information to determine my eligibility for volunteer positions with the Township. I understand that as long as I am a volunteer, the criminal history records check may be repeated at any time. I understand that I will have an opportunity to review the criminal history and that a procedure is available to me to obtain clarification from the appropriate reporting agency if I dispute the record as received.

**APPLICANT:**

\_\_\_\_\_ (Print Name)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (Date)

**PARENT/LEGAL GUARDIAN:**

\_\_\_\_\_ (Print Name)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (Date)

**Parent/Legal Guardian signature is required.**

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Received by: \_\_\_\_\_

Date: \_\_\_\_\_



## Volunteer Liability Waiver

I offer to volunteer my services without compensation to the Allendale Charter Township (the "Township").

I release the Township, and their officers, directors, agents, patrons, employees, and volunteers from any liability for any loss, cost, or damage to me or my property arising out of or in connection with my volunteer work for the Township.

I agree to hold harmless the Township against and from any and all liabilities, obligations, damages, penalties, claims, costs, charges, and expenses (including, without limitation, fees and expenses of attorneys, expert witnesses, and other consultants) which may be imposed upon, incurred by, or assessed against the Township by reasons of any negligent or wrongful act on my part, or any failure by me to perform volunteer work.

I agree to abide by all directions, procedures, and guidelines applicable to volunteers, to treat Township's staff, volunteers, and visitors with courtesy and respect, and to be a cooperative and considerate representative of the Township.

I understand that there are occasions where pictures may be taken while I am a volunteer and I further understand that these pictures may be used for promotional purposes by the Township. I have no expectation of payment for the use of my pictures and agree to release the Township of any obligations or responsibility of such pictures being used.

I accept the Township's right to dismiss me for poor performance of my duties, for poor attendance, for the lack of need for my services, or for any other reason permitted by law.

**APPLICANT:**

\_\_\_\_\_ (Print Name)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (Date)

**PARENT/LEGAL GUARDIAN:**

\_\_\_\_\_ (Print Name)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (Date)

**Parent/Legal Guardian signature is required.**

**For Office Use Only:**

Received by: \_\_\_\_\_

Date: \_\_\_\_\_



## Workplace Accommodations Notice

The Allendale Charter Township (collectively, the “**Township**”) provide equal employment opportunity for all persons regardless of race, religion, color, sex, height, weight, marital status, national origin, age, disability, or any other classification protected by federal, state, or local law.

The Township will make reasonable accommodations for known physical or mental disabilities of an applicant, volunteer, or employee, as well as known limitations related to pregnancy, childbirth, or a related medical condition, such as lactation, unless the accommodation would cause an undue hardship. Among other possibilities, reasonable accommodations could include:

- Acquisition or modification of equipment or devices;
- More frequent or longer break periods or periodic rest;
- Assistance with manual labor; or
- Modification of work schedules or job assignments.

Employees, volunteers, and job applicants have a right to be free from unlawful discrimination and retaliation. For this reason, the Township will **not**:

- Deny volunteer opportunities on the basis of a need for reasonable accommodation;
- Deny reasonable accommodation for known limitations, unless the accommodation would cause an undue hardship;
- Take an adverse employment action, discriminate, or retaliate because the applicant or volunteer has inquired about, requested, or used a reasonable accommodation;
- Require an applicant or an employee to accept an accommodation that is unnecessary; or

Disabled applicants, volunteers, and employees may request an accommodation by notifying the Township of the need for accommodation within 182 days of the date the person knows or should know that an accommodation is needed. Failure to properly notify the Township will preclude any claim that the Township failed to accommodate the disabled individual. To request an accommodation or to discuss concerns or questions about this notice, please send an email to [hr@allendalemi.gov](mailto:hr@allendalemi.gov).

By signing below, I affirm that I have read and understand this Workplace Accommodations Notice, including the proper procedure for requesting an accommodation.

**APPLICANT:**

\_\_\_\_\_ (Print Name)  
 \_\_\_\_\_ (Signature)  
 \_\_\_\_\_ (Date)

**PARENT/LEGAL GUARDIAN:**

\_\_\_\_\_ (Print Name)  
 \_\_\_\_\_ (Signature)  
 \_\_\_\_\_ (Date)

**Parent/Legal Guardian signature is required.**

**For Office Use Only:**

Received by: \_\_\_\_\_  
 Date: \_\_\_\_\_



*Allendale*  
CHARTER TOWNSHIP

## Drug-Free and Alcohol-Free Workplace Notice

The Allendale Charter Township (the “**Township**”) is committed to providing a healthy, safe, drug-free and alcohol-free workplace for all employees and other individuals in our workplace. We recognize that alcohol or marijuana use, and the use of illegal drugs, could pose a threat to these goals.

In furtherance of the Township’s goals, the Township strictly prohibits the illicit use, possession, dispensation, distribution, or manufacture of alcohol and controlled substances in the workplace under its Drug-Free and Alcohol-Free Workplace Policy. Any volunteer who violates this policy will be subject to disciplinary action, including suspension or termination of his or her volunteer placement.

By signing below, I certify that I have received, read, and understand this Drug-Free and Alcohol-Free Workplace Notice; have had the opportunity to have it explained to me; and that I agree to adhere to this policy.

**APPLICANT:**

\_\_\_\_\_ (Print Name)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (Date)

**PARENT/LEGAL GUARDIAN:**

\_\_\_\_\_ (Print Name)

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (Date)

**Parent/Legal Guardian signature is required.**

**For Office Use Only:**

Received by: \_\_\_\_\_

Date: \_\_\_\_\_