



YOUTH PROTECTION POLICY

YOUTH PROGRAM VOLUNTEER APPLICATION

**For Club and District Youth Programs
(Not REGL, RYLA or RYE)**

**Adopted: July 2018
Updated: September 2019**

DISTRICT 5190 YOUTH PROGRAM VOLUNTEER APPLICATION

District 5190 strives to create and maintain a safe environment for all youth who participate in Rotary activities. To the best of their ability, Rotarians, Rotarians' spouses and partners, and other volunteers must safeguard the children and young people they come into contact with and protect them from physical, sexual, or emotional abuse.

This information may be provided to an outside agency that this Rotary district has retained to conduct background checks. In some cases, applicants may be asked to obtain their own background checks for review by district officials.

PERSONAL INFORMATION

Full Name _____

Address _____

City _____ State/Province _____ Postal code _____

Phone _____ Position _____ Email _____

How long have you lived at this address? _____

(If fewer than five years, list previous residences in an attachment.)

Primary phone: _____ Secondary phone: _____

Date of birth (dd/mm/yyyy): _____

CONSENT

I certify that all of the statements in this application and any attachments are true and correct to the best of my knowledge and that I have not withheld any information that would affect this application unfavorably. I understand that District 5190 will deny a volunteer position to anyone convicted of a crime of violence, sexual abuse or harassment, or any other crime of a sexual nature and may deny a volunteer position to anyone who has been charged with these crimes.

I give District 5190 permission to verify the information on this application, including by reviewing the public records that I have provided, which are duly certified, or by searching law enforcement and other published records (including driving records and criminal background checks) in addition to contacting my former employers and the references I provided. I understand that this information will be used in part to determine my eligibility for a volunteer position. I also understand that as long as I remain a volunteer, this information may be checked again at any time. I understand that I will have an opportunity to review my criminal history.

WAIVER

In consideration of my acceptance and participation in the Rotary youth program, I, to the full extent permitted by law, hereby release, defend, hold harmless, and indemnify participating Rotary clubs, Rotary districts, multidistrict organizations, and their members, officers, directors, committee members, agents, and employees, and Rotary International, its directors, officers, committee members, employees, agents, and representatives ("Indemnitees") from any or all liability for any claim, loss, damages, liabilities, expenses, bodily injury, or death, including any such liability that may arise out of the negligence of any of the Indemnitees or may be suffered or claimed by me as a result of an investigation of, action concerning, or communication of my background in connection with this application.

I further agree to conform to the rules, regulations, and policies of Rotary International, the District 5190 youth program, and its affiliates.

I hereby confirm, represent, and warrant that I have never been convicted of or charged with a violent crime, child abuse or neglect, child pornography, child abduction, kidnapping, rape, or other sexual offense, nor have I ever been ordered by a court to receive psychiatric or psychological treatment in connection therewith.

If any provision of this agreement is determined to be illegal or unenforceable, the remaining provisions shall remain in full force and effect. By signing this Application, I acknowledge that I have read this Application and fully understand its contents.

Signature of applicant _____

Printed name _____ Date _____

EMPLOYMENT HISTORY (FOR THE PAST FIVE YEARS; ATTACH ADDITIONAL SHEETS IF NECESSARY)

Current employer _____

Address _____

City _____ State/Province _____ Postal code _____

Phone _____ Position _____ Email _____

Dates of employment _____ Supervisor's name _____

Previous Employer _____

Address _____

City _____ State/Province _____ Postal code _____

Phone _____ Position _____ Email _____

Dates of employment _____ Supervisor's name _____

ROTARY HISTORY WITH YOUTH (ATTACH ADDITIONAL SHEETS, IF NECESSARY)

Why do you want to volunteer for Rotary Youth Programs?

Have you held a Rotary youth program position in the past? ☐ Yes ☐ No

If yes, indicate below:

District _____

Role: _____ Years: _____ District: _____

Club _____

Role: _____ Years: _____ Club: _____

**VOLUNTEER HISTORY WITH YOUTH (FOR THE PAST FIVE YEARS;
ATTACH ADDITIONAL SHEETS, IF NECESSARY)**

Organization: _____

Role: _____ Dates: _____

Organization: _____

Role: _____ Dates: _____

Online Youth Protection Training is required of all volunteers for Rotary Youth Programs. NAYEN (North American Youth Exchange Network) training can be requested by emailing the Youth Protection Trainer (ypt5190@gmail.com). Online training must be repeated at least every three years. Please check the box and initial if you have requested NAYEN training.

Δ _____

**PERSONAL REFERENCES (MAY NOT BE RELATIVES; NO MORE THAN
ONE MAY BE A FORMER OR CURRENT ROTARIAN)**

1. Name: _____

Address: _____

City: _____ State/Province: _____ Postal code: _____

Phone: _____ Relationship: _____

2. Name: _____

Address: _____

City: _____ State/Province: _____ Postal code: _____

Phone: _____ Relationship: _____

3. Name: _____

Address: _____

City: _____ State/Province: _____ Postal code: _____

Phone: _____ Relationship: _____

QUALIFICATIONS AND TRAINING

What qualifications do you have, and what preparation and training have you completed for this position?

CRIMINAL HISTORY

1. Have you ever been charged with, been convicted of, or pleaded guilty to any crimes? Δ Yes Δ No
2. Have you ever been subject to any court order (including an order from a civil, family, or criminal court) that involved sexual, physical, or verbal abuse, including but not limited to domestic violence or civil harassment injunctions or protective orders? Δ Yes Δ No

If you answered yes to either question, please explain. Also indicate the dates of the incidents and the country and province or state in which each occurred (attach a separate sheet, if needed).

Application review and approval:

Club Youth Service Chair or Club Youth Protection Officer

DATE

References checked by _____
Signature

Print Name

Club President

Approved by _____

DATE	Signature	Print Name
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Rotary Club of _____

Club Youth Protection Officer will store all completed and approved applications in a secure manner.