



Thank you for your interest in being a volunteer in Sierra Club's Inner City Outings (ICO) program. It is our goal to ensure safe, fun and inspiring outings for participants and leaders, and this form provides the first step for prospective volunteers to join us in this endeavor.

The Sierra Club will review your application and assess whether you have the appropriate experience and background to volunteer for Inner City Outings. The information in this application will be kept confidential and not shared with anyone other than the people directly involved in assessing your volunteer application.

PERSONAL INFORMATION

Name: _____

Address: _____
City State Zip

Phone: H: () _____ W: () _____ Cell: () _____
Please circle best contact number.

E-mail Address: _____

Occupation: _____

Emergency Contacts: (name, phone #, address)

1) _____

2) _____

Medical Insurance Provider: _____ Plan number (optional): _____

Sierra Club Membership #: _____ Exp: _____

Experience and Interest

How did you hear about Inner City Outings? What if any interactions have you had to date with ICO?

Are you a certified leader with another Sierra Club entity? Yes or No (circle one)

If yes, please list which one: _____

Why do you want to become involved with Sierra Club Inner City Outings?

Identify previous or current volunteer experiences you have had as an adult that may be relevant to your roles as an ICO leader. Please include the name of the organization, the timeline of your commitment, and the roles you served.

_____	/	_____	_____
Name of Organization	From	To	Role served

_____	/	_____	_____
Name of Organization	From	To	Role served

Briefly describe previous experience you have had working with youth.

Describe your outdoor interests and experiences. Mark "I" next to activities you are interested in learning how to do, "E" next to activities you have experience doing, and "G" next to items you can guide or teach.

Camping _____	Hiking _____	Snowshoeing _____
Canoeing _____	Kayaking _____	Swimming _____
Cross-country skiing _____	Orienteering _____	Group games _____
	Rafting _____	Other _____

Reference and Background Check

Please provide contact information for at least two references who are not relatives, and who preferably know you in a work or volunteer context:

Name: _____ Phone #: _____ Relationship: _____

Name: _____ Phone #: _____ Relationship: _____

Name: _____ Phone #: _____ Relationship: _____

Do you know anyone who is currently an ICO volunteer? **Yes or No (circle one)**

If yes, who?

Inner City Outings volunteers must pass a criminal background check every four years. If the following offenses are identified in the criminal background check, the individual cannot be a Sierra Club youth-oriented outings leader:

- Any crimes against children
- Crimes against people- (murder, assault, domestic violence)
- Indecency

An unacceptable driving record will prohibit a volunteer from driving on ICO trips. For a list of applicable violations, please visit http://clubhouse.sierraclub.org/outings/ico/policies/ico-policies.aspx#screening_policy.

Each person who receives a "fail" decision has the right to submit an appeal of the background check result within thirty days of receipt of the "fail" notification. They also have the right to obtain the background check report and contact the provider of the information.

ICO pays for any fees associated with background checks. We will provide each applicant with the instructions on how to complete the background screening process.

I certify that the information given herein is true and complete to the best of my knowledge. I hereby authorize the Sierra Club to investigate all statements contained in this application, contact individuals and/or organizational references, and authorize the release of personal information regarding me. This information is to be used only to determine my suitability for volunteering with Inner City Outings. I understand that misrepresentation or omission of facts will be sufficient cause for termination of volunteer service.

Signature: _____ Date: _____

Parent/Guardian's Signature (if under age 18): _____ Date: _____

Witness's signature: _____ Date: _____