



READING AND BEYOND

4819 E. Butler Avenue

Fresno, CA 93727

Phone: 559-454-8810

Fax: 559-454-8811

www.ReadingandBeyond.org

Welcome, thank you for your interest in
volunteering with Reading and Beyond!

Please submit the entire completed application to
Volunteer Coordinator: Beckie Ninnis

All of the following documents must be submitted to qualify as a
completed application:

- Application Form (page 2-3)
- Agreement Statement (page 4)
- Photocopy of a valid Driver's License or Photo ID (please attach)
- Fingerprint clearance
 - ❖ Volunteers under 18 are exempt from fingerprinting
 - ❖ \$20 charge, reimbursed with receipt



Volunteer Application Form

Contact Information

Name: _____ Home Phone: _____ Cell Phone: _____
Address: _____ City: _____ State: _____ Zip: _____
Email Address: _____

Desired Volunteer Opportunity

Please check one: Reading Tutor Office/Clerical Special Events Reading Assessment
 Other: _____

Availability

Day:	Monday	Tuesday	Wednesday	Thursday	Friday
Time:					

Date that you are available to begin volunteering: _____

Personal Information

Have you previously volunteered with Reading and Beyond? Yes No
 If yes, please describe: _____
 Date of Birth: _____ Are you at least 18 years old? Yes No *(Fingerprinting is not required for volunteers under 18)*
 Why are you interested in volunteering with Reading and Beyond?

 Please list any special skills, hobbies or interests you have:

 Please list any foreign language skills:
 Language: _____ Speak Read Write
 Language: _____ Speak Read Write

Emergency/ Medical

In case of emergency, please call:
 Name: _____ Relationship: _____ Phone Number: _____
 Allergies: _____
 Other relevant medical information: _____



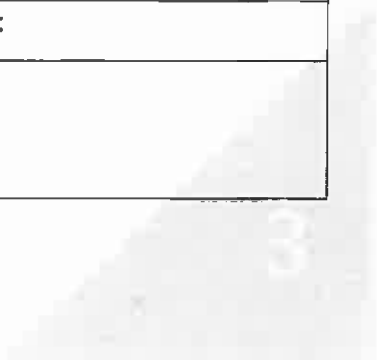
Volunteer Application Form

Education	Employment
Please check your highest level of education: <input type="checkbox"/> Some High School <input type="checkbox"/> College Degree (BA/BS) <input type="checkbox"/> High School Diploma <input type="checkbox"/> Graduate Degree <input type="checkbox"/> Some College (MA/MS) <input type="checkbox"/> Other: _____ <input type="checkbox"/> Teaching Credential	Are you currently employed? <input type="checkbox"/> yes <input type="checkbox"/> no Occupation: _____ Employer: _____

References				
Because we place a lot of responsibility on our volunteers, we request two references.				
Name:	Phone	Address	Number of years acquainted:	Title/ Relationship:

How did you hear about Reading and Beyond?		
<input type="checkbox"/> Friend: _____	<input type="checkbox"/> Family member: _____	<input type="checkbox"/> Newspaper: _____
<input type="checkbox"/> Church: _____	<input type="checkbox"/> Internet: _____	<input type="checkbox"/> AARP: _____
<input type="checkbox"/> School: _____	<input type="checkbox"/> Other: _____	
Professor Name: _____		

For Office Use		
Application Date:	Start Date:	End Date:
Training Date:	Site:	Schedule:
Fingerprint Form given? yes <input type="checkbox"/> no <input type="checkbox"/>	Walk in? <input type="checkbox"/>	Mail in? <input type="checkbox"/> Online? <input type="checkbox"/>
Completed By:	Date:	





Agreement Statement

By being a volunteer at Reading and Beyond, you agree to:

1. Commit to volunteer at least 1 hour, 2 days a week, for 3 months.
2. Adhere to your pre-determined schedule (if for any reason you are not able to attend, please notify your supervisor)
3. Attend a training/orientation session at Reading and Beyond
4. Adhere to the mission and goals of Reading and Beyond
5. Report any problems or concerns that may arise to your supervisor

I _____, declare that the information provided is true to the best of my knowledge. I also understand that a criminal record and child abuse registry check as well as reference checks may be required as a condition of volunteering with Reading and Beyond

I understand that I am volunteering my services solely for my personal purposes or benefit without promise or expectation of compensation or benefits.

Photo/Video/Web Release (Optional):

_____ (Initial) I give Reading and Beyond the absolute right and permission to take and use photograph(s) and video of me in its promotional materials and publicity efforts. I understand that the photograph(s) may be used in publication, print advertising, and electronic media (e.g. video, CD-ROM, Internet, World Wide Web), or other forms of promotion. I release Reading and Beyond, its photographer, their offices, employees, agents, and designees from liability for any violation of any personal or proprietary right I may have in connection with such use.

I certify that all statements made in this application are complete and accurate; I understand that:
All volunteers must be at least 14 years of age and fulfill all volunteer requirements as stated above.

Signature of Applicant: X _____ **Date:** _____

Parent/Guardian Signature (If applicant is under 18)

I _____ declare that I am the legal guardian of _____ and hereby give permission for him/her to participate in volunteer activities as required by Reading and Beyond. I understand that my child must meet the following conditions and hereby acknowledge the conditions can be met: The child is under the age of eighteen (18) at the time of the volunteer activity and has transportation to and from volunteer activities.

X _____ **Date:** _____

State of California
REQUEST FOR LIVE SCAN SERVICE

Department of Justice

BCII 8018A (3/07)

Applicant Submission for Public Schools or Joint Powers Agencies

ORI: Z0001

Type of Applicant: (check one) Classified School Employee Credentialed School Employee

The following selections are for Public Schools only:

License, Certification, Permit Peace Officer Law Enforcement Personnel Volunteer

Job Title or Type of License, Certification or Permit: VOLUNTEER

Agency Address Set Contribution Agency:

READING AND BEYOND

Agency authorized to receive criminal history information

05002

Mail Code (five-digit code assigned by DOJ)

4819 E. BUTLER AVENUE

Street No Street or P.O. Box

LUIS SANTANA

Contact Name (Mandatory for all school submissions)

FRESNO

City

CALIFORNIA

State

93727

Zip Code

(559) 454-8810

Contact Telephone Number

Name of Applicant: _____
(please print) Last First Middle Initial

AKA's: _____ CDL No. _____
Last First

DOB: _____ SEX: Male Female Misc. No. BIL: _____
Agency Billing Number

HT: _____ WT: _____ Misc. No. _____

EYE Color: _____ HAIR Color: _____ Home Address: (applies only if Youth Org / HRA or Public Utility Submission)

POB: _____
Street or P.O. Box

SOC: _____
City, State and Zip Code

Your Number: _____
OCA No. (Agency Identifying No.)

If resubmission, list Original ATI No. _____

Level of Service: DOJ FBI

Live Scan Transaction Completed By: _____ Date: _____

Transmitting Agency

ATI Number

Amount Collected / Billed

ORIGINAL - Live Scan Operator

SECOND COPY - Applicant

THIRD COPY (if needed) - Requesting Agency

To obtain Live Scan Service (fingerprinting), please go to:

Fresno County Sheriff's Department

1225 M Street
Fresno, CA 93721
(559) 488-2567

(M Street at Fresno Street, in Downtown Fresno)

- No Reservation is needed. Walk in.
- Monday-Friday from 8:00 a.m. to 12:00 p.m.
- Must bring current photo identification (I.D.)
- Enter main entrance of jail. Ask for "Fingerprinting."
- Have form ready: "Request for Live Scan Service."
- \$20.00 fee for fingerprinting.

NOTE: Reading And Beyond requires fingerprinting for all volunteers over the age of 18, even if he/she has been previously cleared through another agency.

Please contact our office if you have questions about this policy.