

700 State Drive
 Los Angeles, CA 90037
 213-744-2124
VolunteerDept@cscmail.org
www.casciencectr.org



California Science Center Volunteer Application (Adult)

The California Science Center welcomes enthusiastic individuals of all backgrounds and abilities. No aspect of our volunteer program is influenced by race, religion, national origin, sex, disability, age, or any other basis prohibited by law, but rather by factors such as commitment, dependability, and a desire to be of service.

Volunteer Assignments Will Be Based On a Minimum 3 Month Overall Commitment

DATE: _____

PERSONAL DATA	Last Name:	First Name:	MI:	Other Names You Have Used:
	Street Address:			
	City:		Zip Code:	
	Home Phone:		Fax:	
	E-Mail:		Other:	
	Emergency Contact:		Relationship:	Emergency Phone:
Social Security:		Driver's License Number:	Exp. Date:	

Check appropriate blank(s): employed student retired
 Employer/School: _____ Phone: _____
 Title/Position: _____ May we contact if necessary? yes no

COMMUNITY SERVICE / CLASS CREDIT REQUIREMENT

Are you volunteering for class or community credit? If so, the California Science Center requires you to complete **80** hours of service if you want to receive community service / class credit.

No, I have a personal interest in becoming a volunteer. Yes. As a volunteer, I agree to complete **80** hours of service at the California Science Center. I understand that if I do not complete the **80** hours, the California Science Center will NOT certify that I volunteered at the California Science Center. With my initials, I agree to fulfill this requirement. _____ (Initials)

PLEASE DESCRIBE THE FOLLOWING

How did you first learn about our Volunteer Program?
 Visiting the California Science Center? yes no Friend/Family Member? yes no
 High School, College, Employer, Church/Synagogue, Community Organization, Internet Site (indicate which one)
 Name: _____ Phone: _____

Previous or current volunteer experience: _____

Educational background, hobbies, or special interests: _____

AGREEMENT AND CERTIFICATION

 Initials As a volunteer, I agree to hold as absolutely confidential all privileged, and or sensitive information which I may obtain directly, or indirectly concerning the California Science Center and California Science Center Foundation, its guests and staff (including employees and volunteers). I agree that my services are donated to the California Science Center and California Science Center Foundation without contemplation of compensation, or future employment. I agree to grant permission to the California Science Center and California Science Center Foundation, its constituents and affiliates, permission to use my name/ and (or dependents), voice, statements, photographs, and other reproductions and likeness for promotional purposes (e.g. press releases, media interviews, audio/visual and printed materials). I further agree to comply with the policies and procedures, as well as the approved safety practices, in all areas of the California Science Center and California Science Center Foundation. I understand that my volunteer status may be terminated at will at any time and for any reason, including, but not limited to, for example, failure to comply with the policies and procedures of the California Science Center and California Science Center Foundation, failure to comply with the policies and procedures of the volunteer department such as absences without notification, reasons of unsatisfactory attitude, work, or appearance, and or for any other circumstances which in the judgment of the California Science Center and California Science Center Foundation would make my continued service as a volunteer contrary to their best interests.

 Initials I certify that the answers given by me to the foregoing questions and statements are true, correct, and without omissions. I authorize the California Science Center and California Science Center Foundation to investigate and/or verify the foregoing information, and any other information that might assist them in determining my qualifications for volunteering. I also hereby release the California Science Center and California Science Center Foundation, and my former employers, and all others from liability from damage which may result from such investigation.

 Name of Applicant (Print) Signature Date



**CALIFORNIA SCIENCE CENTER FOUNDATION
VOLUNTEER DEPARTMENT
APPLICANT SURVEY**

I AREAS OF INTEREST

- | | |
|--|--|
| <input type="checkbox"/> Education Exhibits & Programs | <input type="checkbox"/> Guest Services |
| <input type="checkbox"/> Office Assistant | <input type="checkbox"/> ExploraStore |
| <input type="checkbox"/> Animal Care Assistant | <input type="checkbox"/> Discovery Rooms |

II SPECIAL SKILLS

- | | |
|--|---|
| <input type="checkbox"/> Computer | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Newsletter Production | <input type="checkbox"/> Education |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Guest Relations |
| <input type="checkbox"/> Addressing/Mailings | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Languages | <input type="checkbox"/> Event Coordination |
| <input type="checkbox"/> Plant/Animal Care | <input type="checkbox"/> Other |

III. Please list names and phone numbers of two references other than immediate family members (for example: employer, minister, teacher, etc.).

Name: _____	Name: _____
Phone: _____	Phone: _____
Relationship: _____	Relationship: _____

IV. Please indicate names, phone numbers and relationship of any CALIFORNIA SCIENCE CENTER volunteers or employees with whom you are acquainted, or check blank. none

Name: _____	Name: _____
Phone: _____	Phone: _____
Relationship: _____	Relationship: _____

V. Are you currently California Science Center Member? yes no

VI. DAY/TIME AVAILABILITY

I am interested in working _____ hours per week.

Days Available	Start Time	End Time
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Exceptions to availability (List dates and times only. Do not include reasons.): _____

VII. Would you like to be notified of special volunteer opportunities throughout the year? yes no

Name of Applicant (Print) _____

Signature _____

Date _____



CALIFORNIA SCIENCE CENTER FOUNDATION

BACKGROUND INVESTIGATION APPLICANT CERTIFICATION AND AUTHORIZATION

Have you ever used or been known by any other name? Yes No If you answered yes, please list all other names you have used and by which you have been known:

Have you ever been convicted of a crime? Yes No If you answered "yes," please explain and include the date(s), court(s), nature of offense(s), and disposition(s). Do not include (a) minor traffic violations, (b) marijuana-related convictions dated more than two years ago, (c) convictions that have been judicially ordered sealed, expunged, or statutorily eradicated, or (d) misdemeanor convictions which have been judicially dismissed pursuant to California Penal Code Section 1203.4. Do not provide any information concerning a referral to, and participation in, any pre-trial or post-trial diversion program. (Explain):

Name of Applicant (Print)

Signature

Date

I hereby give the CALIFORNIA SCIENCE CENTER FOUNDATION the right to conduct an investigation of my background. I understand that CALIFORNIA SCIENCE CENTER FOUNDATION itself may make inquiries regarding, but not limited to, my education, past employment, credit history, and criminal record. Initials

I also give the CALIFORNIA SCIENCE CENTER FOUNDATION permission to obtain an Investigative Consumer Report from IMI Data Search, Inc., 275 Hillcrest Drive, Suite 100, Thousand Oaks, CA 91360, (800) 860-7779. I understand that this Investigative Consumer Report may include information as to my character, general reputation, volunteer activities, education, and information about past employment, including oral assessments of my job performance, experiences, abilities, and reasons for termination. Such a report may be requested by CALIFORNIA SCIENCE CENTER FOUNDATION or on behalf of CALIFORNIA SCIENCE CENTER FOUNDATION. Further, I agree that CALIFORNIA SCIENCE CENTER FOUNDATION may request information from various federal, state, and other agencies, including public and private sources which maintain records concerning my past activities relating to my driving record, credit history, criminal record, civil matters, previous employment, educational background, and professional licensing, if any. Initials

I indemnify the CALIFORNIA SCIENCE CENTER FOUNDATION against any liability, which might result from making such investigation. I understand that any false answers, statements, implications or derogatory information made by me or which is revealed as a result of this background investigation based on information supplied in any application for employment or volunteer opportunities, or other required documents, may be considered sufficient cause for denial of employment, volunteer opportunities or, discharge. Initials

I understand that for Employment Opportunities, the CALIFORNIA SCIENCE CENTER FOUNDATION may contact my previous employers and I authorize those employers to disclose information regarding my dates of employment, job title, last range of pay, eligibility for rehire, and other related information to the CALIFORNIA SCIENCE CENTER FOUNDATION. I hereby release my previous employers from any and all liability, claims, or damages that may directly or indirectly result from the use, disclosure, or release of such information by any person or party, whether such information is favorable or unfavorable to me. Initials

I understand that if CALIFORNIA SCIENCE CENTER FOUNDATION performs its own background check, I have a right to copies of any public records that may be used. By checking the applicable box below, I understand that I have a right to copies of such public records within seven (7) days of receipt by CALIFORNIA SCIENCE CENTER FOUNDATION, unless such records indicate wrongdoing, in which case the availability of copies to me may be delayed. I also understand that I have a right to a copy of any Investigative Consumer Report obtained by CALIFORNIA SCIENCE CENTER FOUNDATION. By checking the applicable box below, I understand that I have the right to a copy of the Investigative Consumer Report three (3) days after CALIFORNIA SCIENCE CENTER FOUNDATION receives such report.

I wish to receive a copy of any public records obtained by CALIFORNIA SCIENCE CENTER FOUNDATION in connection to its investigation of my background.

I wish to receive a copy of any Investigative Consumer Report obtained by CALIFORNIA SCIENCE CENTER FOUNDATION in connection with any consumer reporting agency investigation of my background.

I also understand that under section 1786.22 of the California Civil Code, I may view the file maintained on me by IMI Data Search, Inc. during normal business hours. I may obtain a copy of this file upon submission of proper identification and payment of the cost of duplication services, by appearing at IMI Data Search, Inc. in person or by mail. I may also receive a summary of the file by telephone. IMI Data Search, Inc. is required to have personnel available to explain my file to me during normal business hours, including explanation of any coded information appearing in my files. Initials

I have read and understand the attached Applicant Disclosure, a copy of which I acknowledge receiving, advising me that a comprehensive background investigation will be conducted, which may include inquiry into past employment, education, and activities, including but not limited to, credit, criminal background information and my driving record.

Applicant Name (Print): DOB / / Social Security Number: - - -

Applicant Signature Date Driver's Lic. No. Expiration Date State

COMPLETE THIS FORM AND RETURN IT WITH YOUR APPLICATION

BACKGROUND INVESTIGATION APPLICANT DISCLOSURE

The CALIFORNIA SCIENCE CENTER FOUNDATION will conduct a background investigation. The investigation will be comprehensive and may include inquiry into past employment, volunteer activities, and education, including but not limited to credit, criminal background information and driving record.

The CALIFORNIA SCIENCE CENTER FOUNDATION has contracted with IMI Data Search, Inc., 275 E. Hillcrest Dr., Suite 100 Thousand Oaks, CA 91360, (800) 860-7779, to conduct the background investigation and compile an Investigative Consumer Report regarding the applicant's character, reputation, personal characteristics, which may include, but is not limited to, information regarding past employment, volunteer activities, education, credit history, criminal background, and driving record.

The applicant has the right to a copy of any such hvestigative Consumer Report. If the applicant desires such a copy and makes that desire known, then the applicant is entitled to a copy of the report three (3) days after CALIFORNIA SCIENCE CENTER FOUNDATION receives the report.

APPLICANT COPY

Keep This Copy for your Records