



*Youth Outlook is planning its next round of volunteer training and your name can be added to the list of potential volunteers to assist us with running our drop-in centers, working with our youth leaders, and supporting our healthy relationships and health/wellness education. Training dates are to be determined based on volunteer availability.*

Please complete the enclosed forms and return them to the address noted below. You will also find enclosed a hard copy of our Child Abuse and Neglect Tracking System (CANTS) form. **Please do not send your completed CANTS form directly to Springfield;** all CANTS forms are sent in packets to Springfield from the Youth Outlook office. In addition to the child abuse and neglect background check, all volunteer names are subject to a criminal background check.

There is a small fee associated with our application (\$15.00) which can be included with the returned application. Checks can be made payable to Youth Outlook. All volunteers candidates will be asked to meet for an interview prior to training.

Current volunteers, youth leaders and local professionals assist with running our training. All sessions are mandatory. New trainees are required to observe one of the operating groups in Naperville, DeKalb or Aurora before being assigned to the volunteer schedule.

As you can see from the described screening process and the training course, we ask for a high level of commitment from our volunteers. We believe our youth group members deserve the very best. At Youth Outlook, you will see that there is no such thing as "just a volunteer". Our volunteers make our work happen every week, in three counties. We're there, because you're there. If this sounds like a good fit for you, we'd like to hear from you.

If you have any questions about the volunteer scope of responsibilities, please do not hesitate to call the Youth Outlook office (815) 754-5331, and I will personally return your call.

Thank you for your interest in Youth Outlook. I look forward to meeting with you.

Sincerely,

Nancy Mullen, MSW  
Executive Director

Enclosures

**Return all forms to:**

Youth Outlook  
4 South 535 Old Naperville Rd.  
Naperville, IL 60563



# YOUTHOUTLOOK

## Volunteer Application Form

All information provided on this application is subject to verification. It is our procedure to contact personal references and to conduct a criminal history check and DCFS registry check of prospective volunteers. All records verification will be strictly confidential.

### Personal Information

Full Name: \_\_\_\_\_  
Last first middle any other name known by

Address: \_\_\_\_\_  
Street Apt.#

City/State/Zip \_\_\_\_\_

Home Phone:( ) \_\_\_\_\_ Work Phone: ( ) \_\_\_\_\_

Are you 20 years or older? \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Drivers License #: \_\_\_\_\_ State Issued: \_\_\_\_\_

Place of Birth: \_\_\_\_\_

E Mail Address: \_\_\_\_\_

*Volunteer setting information: Some of our drop-in center sites require the ability to climb stairs.*

### Employment History (List employment history starting with current employer)

Employer Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Position(s): \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Job Duties/Responsibilities: \_\_\_\_\_

Employer Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Position(s): \_\_\_\_\_ From: \_\_\_\_\_ To: \_\_\_\_\_

Job Duties/Responsibilities: \_\_\_\_\_

**May we contact you at work? \_\_\_\_\_ YES \_\_\_\_\_ NO**

No identifying information is issued other than director's name and office number for return call.

**“At Youth Outlook, there is no such thing as JUST a volunteer!”**



**Education Information**

List any special skills, abilities, courses, workshops/training sessions, licenses/certification, etc. that might relate to the volunteer position for which you are applying.

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Education (Grade level or Degree Completed): \_\_\_\_\_

School/College/University Presently Attending: \_\_\_\_\_

Area of Study: \_\_\_\_\_

If currently attending school, will you be receiving credit for volunteering? \_\_\_\_\_

**Additional Information**

Are you fluent in a language other than English? If so, please specify: \_\_\_\_\_

Please list previous volunteer experience.

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How many hours per month are you able to volunteer? \_\_\_\_\_

Days available to volunteer: \_\_\_\_\_

How did you hear about Youth Outlook?

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Have you ever been convicted of a crime? If yes, please provide date, place, nature of conviction, and disposition.

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**References**

(Employment or professional references are preferred.) Please provide name, address, phone number and type of relationship.

- 1. \_\_\_\_\_  
\_\_\_\_\_
- 2. \_\_\_\_\_  
\_\_\_\_\_
- 3. \_\_\_\_\_  
\_\_\_\_\_

May we add your references' names to the Youth Outlook mailing list?  YES  NO

**In case of emergency, please contact:**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Home phone #: \_\_\_\_\_

Work phone #: \_\_\_\_\_

Cell/Pgr #: \_\_\_\_\_

*I hereby acknowledge that the information provided in this application is true and correct and I understand that any misrepresentation by me may be cause to terminate my position as a volunteer.*

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

For Youth Outlook Use Only	
Interview Date: _____	Interviewed by: _____
Scheduled Training Dates: _____	Completed Training: _____
OBS Date: _____	OBS Site: _____

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