



My Emergency Contacts		
Name: _____	Relationship to you:	Phone:
	City:	State:
Name: _____	Relationship to you:	Phone:
	City:	State:

Boston Chinatown Neighborhood Center, Inc. (BCNC) values your participation and privacy as a program participant. BCNC treats personal data as strictly confidential. Data is not disclosed to parties who have not signed a Disclosure/ Confidentiality Agreement unless authorized by federal mandate. Data is stored in confidential and secure platforms and accessible only by authorized personnel.

I give my permission to BCNC to document and use audio, visual, photograph, print, and/or web media for nonprofit publicity and/or educational purposes. I understand that I am not entitled to any compensation for use. I hereby release BCNC, its employees, agents, officers, and trustees from all claims, demands, and liabilities whatsoever in connection with this use.

I understand that BCNC performs background checks on all volunteers and that this will be done on me. I understand that my acceptance as a BCNC volunteer will be dependent on the results of these checks.

I certify to the best of my ability that the information provided on this application is true and accurate. I also understand that misinformation knowingly provided here, and on subsequent volunteer application forms, is grounds for dismissal.

I understand that BCNC and the Youth Center are not obligated to accept me as a volunteer, and the reasons for my being rejected do not have to be disclosed to me.

Signature: _____



Youth Center

Do you have any accessibility needs that YC should be mindful of?

Do you have any volunteer/community service experience?

Do you have experience working with youth?

Why are you interested in volunteering with BCNC? Why are you interested in volunteering with YC?

What strengths and skills can you bring to this program?

What are your interests and hobbies?

If you could give advice to a youth, what would you say?

Complete the following sentences:

Youth are _____

My friends describe me as _____

When I was 14, I _____

A youth/teen center is _____

I work best with youth who are _____

Please check which YC program(s)/activities you are interested in volunteering for:

- College Access and Post-Secondary Program Mentor
- Chinese Immigrant Student Leadership (ChISL) Program
- Career Development Activities

Do you prefer working with a particular age group?

- 9th-10th (age 14-16)
- 11th-12th (age 16-19)
- No Preference

Were you born in the US?

- Yes
- No – Specify:



For the College Access and Post-Secondary Program

If we cannot match you with a suitable junior student in high school, are you open to being matched with a high school senior for a one-year mentorship, instead of a two-year commitment?

What did you study in college (major, minor, significant courses, etc.)?

How and why did you pick the college you went to?

How familiar are you with the financial aid process in applying to college?

Would you be willing to support an undocumented or DACA student through CAP?

Please provide an example of a mentor/mentee working relationship that you have found successful in the past.

References

Name: _____	Relationship to you:	Phone:
	Years of Acquaintance:	Email:
Name: _____	Relationship to you:	Phone:
	Years of Acquaintance:	Email:

Staff Use Only

<input type="checkbox"/> Intake Application	<input type="checkbox"/> Entered in CiviCore
<input type="checkbox"/> CORI/BRC	<input type="checkbox"/> Processed <input type="checkbox"/> Cleared
<input type="checkbox"/> SORI	<input type="checkbox"/> Processed <input type="checkbox"/> Cleared
<input type="checkbox"/> Interviewed	<input type="checkbox"/> Matched