



Volunteer Application

First Name: _____ Last Name: _____

Are you under the age of 18? ___yes ___no

Mailing Address: _____ City: _____ Zip Code: _____

Home Phone: _____ Cell Phone: _____ Email: _____

Have you volunteered with us before? ___yes ___no Are you a former employee? ___yes ___no

Emergency Contact Information:

Full Name: _____ Relationship: _____

Phone Number: _____ Address: _____

Please indicate any programs you are interested in assisting:

Meals on Wheels:

Meals on Wheels Driver: _____ Meals on Wheels Assistant Driver: _____ Meals on Wheels Packer: _____

___ Kitchen or Congregate Dining:

Food Prepper: ___ Wait Staff or Server: ___ Dishwasher: ___ Cleaning and Maintenance: ___

___ Medicare

___ Money Minders

___ Administration or Reception

___ Catering

___ Activities or Programs

___ Health and Wellness

___ Janitorial

___ Adult Day Break

Availability – Please indicate the regular dates and times you are available.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Please tell us how you heard about Spectrum Generations:

Please list any qualifications, skills, experiences, or additional languages which will be of special benefit in the job which you want to volunteer for:

Do you have access to reliable transportation for volunteer duties?

Do you have any restrictions for volunteering? (For example: non-driver, lifting, hours available)

By signing your name below on "Signature of Applicant", I, the volunteer, agree to the following statements (Confidentiality Statement, Release and Waiver, Public Media Release Statement) and that all information I have entered is accurate and true to the best of my ability. I also agree that my completion of the Disclosure and Release Authorization form is accurate and complete to the best of my ability.

Confidentiality Statement

I, the volunteer, understand that in the performance of my duties on behalf of Spectrum Generations, I may have access to sensitive information about the client I am serving, and that such information may include medical, insurance, financial, and other sensitive and confidential personal information. I agree to restrict my use of such information to the performance of my duties as a volunteer of Spectrum Generations. I agree I will not discuss cases or mention client(s) names, or otherwise reveal or disclose information pertaining to any client, except within department rules and regulations. Information will only be released to or shared with Spectrum Generations staff, and/or those persons/agencies/businesses that the client (or his/her legal representative) has expressly given permission to do so – and then only for the purpose of assisting the client. I also agree that I will provide my full name, position with the agency and the purpose of obtaining the information on behalf of my client. I hereby acknowledge my obligation to respect the client's privacy and the confidentiality of the information pertaining to the client, and to exercise good faith and integrity in all dealings with the client and their personal information in the performance of my duties as a volunteer of Spectrum Generations. I also understand that any unauthorized use or disclosure of information about or pertaining to a client may result in disciplinary action by Spectrum Generations, and may subject me to civil liability for breaching the client's right to privacy. I also understand that any willful and knowing false representation, for the purpose of obtaining information from those agencies and businesses whose records are subject to the Privacy Act, may be criminally prosecuted.

Release and Waiver

I, the volunteer, do release and hold harmless Spectrum Generations from any and all liability, claims, demands, costs, and damages of any kind, including personal injury, bodily injury, illness, property damage, loss or death. I understand that by signing this release (below signature) I assume the risk of injury, harm, damage, and loss associated with the Activities. I also understand that the agency does not assume any responsibility for provision of financial assistance including medical, health or disability insurance in the event of injury, illness, or property damage. As it is not required to provide insurance by law, I understand that Spectrum Generations does not provide Workers' Compensation Insurance coverage for volunteers, including someone under 18.

Public Media Release Statement

I, the volunteer, do hereby irrevocably grant permission to Spectrum Generations, its employees, agents, representatives, successors, assigns, and affiliates, to take photographs, recordings, and other digital images. I understand that Spectrum Generations will use or publish the photographs, recordings and other digital images in print or electronic promotional, informational, or educational materials, including without limitation use on advertisements, video communication, websites, blogs, electronic mailings and presentations, newsletters, news releases, and/or other print or electronic communication. I understand Spectrum Generations may also share with other community partners, foundations and businesses these photographs, recordings or digital images to use as they deem necessary. I understand and agree the use of such photographs, digital images and recordings are at the discretion of Spectrum Generations and I will have no control over the design, layout, editing, alteration, and use of the same. I authorize the aforementioned use of these photographs, recordings and other digital images without compensation to me (or my minor children, if applicable). All negatives, prints, digital reproductions, and other recorded images shall be exclusively the copyright/property of Spectrum Generations.

Signature of Volunteer Applicant: _____

Date: _____



Disclosure and Release Authorization

Applicant: Read and complete the following

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

Spectrum Generations ("the Company") may obtain information about you for employment purposes from a third party consumer reporting agency. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is related to the duties and responsibilities of the position for which you are applying. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report and a copy of any report about you. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by one or more of the following third party agencies, First Advantage, 1-800-888-5773, <https://enterprise.fadv.com>, Maine Background Check Center, 1-888-572-5839 <https://backgroundcheck.maine.gov/DHHS/MBCC/>, or State of Maine InforME, 1-207-621-2600, <https://www.maine.gov/informe/subscribers/account-manager.html>. The scope of this notice and authorization is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

New York and Maine applicants or employees only: You have the right to inspect and receive a copy of any investigative consumer report requested by the Company by contacting the applicable consumer reporting agency identified above directly. You may also contact the Company to request the name, address and telephone number of the nearest unit of the consumer reporting agency designated to handle inquiries, which the Company shall provide within 5 days.

ACKNOWLEDGMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout my employment, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by one of the third party agencies listed above, another outside organization acting on behalf of the Company, and/or the Company itself. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

Please Print: Last Name First Name Middle Name

Please print other names you have used:

Home Address:

City State Zip Code

Social Security Number: Date of Birth:

Driver's License Number: State Issuing License:

Name as it appears on license:

Applicant's Signature: **Today's Date:**

Para informacion en espanol, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

- **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates. b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street NW Washington, DC 20552 b. Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Protection (OCP) Division of Consumer Compliance and Outreach (DCCO) 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street SW Washington, DC 20423
5. Creditors Subject to Packers and Stockyards Act	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, SW, 8th Floor Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street NE Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	FTC Regional Office for region in which the creditor operates or Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 (877) 382-4357

Please return this completed form to our Volunteer Coordinator using any of the following methods:

Mailing Address: One Weston Court, Augusta, ME 04330

Email Address: volunteer@spectrumgenerations.org

Fax: 207-622-7857

In-person at any of our nearest Spectrum Generations locations found online at www.spectrumgenerations.org