

A BETTER DAY THAN YESTERDAY INITIATIVE PROGRAM

• P.O. Box 7629 • Richmond, Virginia 23231 • phone (804) 939-2303 • E-mail  
abetterdayassoc@gmail.com

• Volunteer Application Section One

Name \_\_\_\_\_

Home  
Address \_\_\_\_\_

Email  
Address \_\_\_\_\_

Home Phone # \_\_\_\_\_

Work Phone # \_\_\_\_\_

Gender \_\_\_\_\_

Social Security# \_\_\_\_\_

Driver's License # \_\_\_\_\_ State \_\_\_\_\_

Expiration Date \_\_\_\_\_

Section Two

>Have you ever been convicted of a misdemeanor or felony (including driving violations)? Yes \_\_\_\_\_  
No \_\_\_\_\_ If yes, please explain.

>Have you ever been convicted of any crime of violence against minors? Yes \_\_\_\_\_ No \_\_\_\_\_ If  
yes, please explain.

>Have you ever been adjudged liable for civil penalties or damages involving sexual or physical abuse of  
children? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

Are you subject to any court order involving sexual or physical abuse of a minor, including but not  
limited to, a domestic order of protection? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

>Have your parental rights ever been terminated for reasons involving sexual or physical abuse of  
children? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please explain.

Section Three

I understand that:

- 1.) This application in no way obligates me to perform any volunteer services;
- 2.) ABDTYIPA Board of Directors, Transportation Program, and the ABDYIPA may deny a volunteer opportunity to any person who answers any of the questions of Section Two in the affirmative;
- 3.) In applying for a volunteer or mentor position the information which I have furnished on this form is subject to verification, which may include a criminal history check and request from any Central Registry of child abusers. For a criminal history check the following information is needed:

Maiden Name \_\_\_\_\_

Race \_\_\_\_\_

4.) ABDTYIPA Board of Directors, Transportation, Video Visitation may terminate volunteer or mentor services of any person: > found to have a history of complaints of abuse of a minor and/or, > found to have resigned, been terminated or been asked to resign from a position either paid or volunteer, due to complaint of sexual abuse of minor. By signing this form, I attest to the fact that the information I have provided is truthful and accurate.

Signature \_\_\_\_\_

Date \_\_\_\_\_

PLEASE INCLUDE A PHOTOCOPY OF A VALID DRIVER'S LICENSE WITH THIS APPLICATION. THANK YOU!