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North Star Rotary Youth Exchange Program YOUTH VOLUNTEER AFFIDAVIT



North Star Rotary Districts 5950 & 5960 Youth Exchange Program, District 5950, District 5960, and the local Rotary Club are committed to creating and maintaining the safest possible environment for all participants in Rotary activities. It is the duty of all volunteers to safeguard to the best of their ability the welfare of and to prevent the physical, sexual, or emotional abuse of youth.

INSTRUCTIONS: The shaded area is to be completed by the Rotary club representative before giving this form to the volunteer.

Rotary Club of _____	Club Contact _____
Address _____	E-mail _____
City/State/Zip _____	Phone _____

For Rotary year 20____ – 20____ Please indicate volunteer's relationship to the North Star Rotary Youth Exchange Program:

Potential host family member Rotary member Rotary Club Youth Exchange Committee member

District Youth Exchange Committee member Rotex Non-Rotary member

Potential host family member #1 #2 #3, TBD (please circle)

PERSONAL INFORMATION (please print legibly)

Name: _____ Home phone: _____

Address: _____ Email: _____

City/State/Zip: _____ Business phone: _____

How long at this address? _____ Cell Phone: _____

If less than five years, please list prior residence: _____

Are you a member of a Rotary club? Yes No If yes, please give club name and year joined: _____

Have you held a Youth Exchange position in the past? Yes No If yes, what position and when? _____

EMPLOYMENT HISTORY (5 years – please attach additional sheets, if necessary)

Current Employer: _____ Position held: _____

Address/City/State/Zip: _____

Telephone: _____ How long with this company? _____

Supervisor's Name: _____

Previous Employer: _____ Position held: _____

Address/City/State/Zip: _____

Telephone: _____ How long with this company? _____

Supervisor's Name: _____

VOLUNTEER HISTORY WITH YOUTH (5 years – please attach additional sheets, if necessary)

Organization Name: _____ Position: _____

Address/City/State/Zip: _____

Telephone: _____ How long with this organization? _____ Director's name: _____

Previous Organization: _____ Position: _____

Address/City/State/Zip: _____

Telephone: _____ How long with this organization? _____ Director's name: _____

PERSONAL REFERENCES (NOT RELATIVES OR MORE THAN ONE FORMER OR CURRENT ROTARIAN)

1. Name: _____ Email: _____

Address/City/State/Zip: _____

Telephone: _____ Relationship: _____ Reference check satisfactory Yes No

2. Name: _____ Email: _____

Address/City/State/Zip: _____

Telephone: _____ Relationship: _____ Reference check satisfactory Yes No

QUALIFICATIONS AND TRAINING

What qualifications and/or training do you have relevant to Youth Exchange or this position? Please describe in full: _____

Volunteer's Signature: _____ Date: _____