



Job's Daughters International

Certified Adult Volunteer Renewal Application

This form may only be used by Certified Adult Volunteers that have current CAV Status on file with the Executive Manager. If your CAV status has lapsed, you must reapply for CAV status using the CAV Application & Profile Form YPP 001.

Please Type or Print **legibly**. Pencil entries cannot be accepted. If you need space for further information, please use the back of the form or attach a separate sheet.

Personal Data

- Name: _____
(Last) (First) (Middle Name – not just the initial)
- Address: _____
City: _____ State: _____ Zip Code: _____
Home Phone: _____ Work Phone (or daytime number) _____
E-mail address: _____
- Bethel No. _____ City: _____ State/Prov. _____
- CAV # _____ 5. Current Title in Bethel / JGC/ GGC/ SGC: _____

Updated Profile Information

Complete these update questions about personal information changes since the submission of your last Certified Adult Volunteer Application and Profile (YPP 001) or CAV Renewal Application (YPP 002). Any questions answered "YES" must be explained in writing. Attach your answers to this form.

- | | | |
|-----|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| YES | NO | Since your last CAV certification have you had your driver's license revoked or suspended for any reason? |
| YES | NO | Since your last CAV certification were you involved in any motor vehicle accidents that resulted in personal injury or fatality? |
| YES | NO | Since your last CAV certification have you been arrested or received a ticket for driving under the influence or alcohol or drugs, drunk driving, reckless driving or careless driving? |
| YES | NO | Since your last CAV certification have you used any illegal drugs, or been treated or hospitalized for drug use? |
| YES | NO | Since your last CAV certification have you used alcohol excessively or been treated or hospitalized for alcohol use? |
| YES | NO | Since your last CAV certification have you been accused, charged, arrested or convicted of any crime? |
| YES | NO | Has any adverse action been taken against you by any YOUTH organization, school, church, or day care center, while you were a volunteer or employee of such an organization or entity? |
| YES | NO | To the best of your knowledge and belief are there any facts or circumstances involving you or in your background that would call into question your being entrusted with the supervision, guidance, and care of young people? |

YES NO Since your last CAV certification have you had a name change? If YES, Please list your prior full name.

YES NO Since your last CAV certification have you had an address change? If YES, Please list your prior address(es).

Affirmation of Understanding of JDI Youth Protection Standards

Read carefully and initial your agreement of the following JDI Youth Protection Standards:

- _____ I understand and agree to follow the Policy and Guidelines as set forth in the JDI Youth Protection Program & Policy.
- _____ I understand that I am to report all violations of the JDI Youth Protection Program & Policy as outlined in the Policy.
- _____ I understand that proper supervision by CAVs is required at all Job's Daughters meetings and activities as outlined in the JDI Youth Protection Program & Policy.
- _____ I understand that in my role as a CAV I am governed by the Constitution and Bylaws of JDI and the Rules & Regulations of my GGC / JGC / BGC.
- _____ I understand that my use of illegal drugs or alcohol while serving in a CAV capacity is strictly prohibited.
- _____ I understand that at any time a background check may be obtained by JDI and that any adverse findings may mean the loss of my status as a CAV.
- _____ I further understand and authorize JDI to verify the information listed in this CAV Renewal Application.

Acknowledgement of CAV Renewal Application

By placement of my signature on the CAV Renewal Application, I acknowledge my understanding of the JDI Youth Protection Program and Policy. I affirm on my honor that the information on this form is true and correct.

Signature: _____ Date: _____

Please Note:

Your Certified Adult Volunteer Renewal Application *must* be signed. A US Funds check for \$18.00 and made payable to "Job's Daughters International" must accompany this application. Incomplete forms will not be processed.

Mail your Application and check to:

**Job's Daughters International
 233 W. 6th Street
 Papillion, NE 68046**

For Office Use

Date of Original CAV _____ Date of Renewal _____

Receipt No. _____

CAV expired _____ CAV Card sent _____

SG / GG / JG notified of renewal _____

Notes: _____