



**Drug-Free Youth \*\*Student Volunteer Application\*\***

CHAPTER: \_\_\_ North Port \_\_\_ Venice \_\_\_ Sarasota \_\_\_ Charlotte \_\_\_ Desoto \_\_\_ Manatee

Date \_\_\_\_\_

Name \_\_\_\_\_ D.O.B \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Phone \_\_\_\_\_ email \_\_\_\_\_

Please provide contact Name and Signature for at least two references  
(teacher/counselor/mentor):

NAME \_\_\_\_\_ SIGNATURE/TITLE \_\_\_\_\_

NAME \_\_\_\_\_ SIGNATURE/TITLE \_\_\_\_\_

In what role do you see yourself as a volunteer for D-Fy?

\_\_\_ Event Planning \_\_\_ Recruiting Businesses \_\_\_ Leadership/Mentor \_\_\_ Other

Signature required for application processing:

*I understand the volunteer application process includes a drug-screen. I also understand this information will not be shared with anyone outside of the application process without my consent, but will remain as part of my application file under supervision of D-Fy coordinating council. Being a volunteer for Drug-Free Youth (D-Fy) signifies that I have validated my commitment to being drug free through a drug screen and annual screens thereafter. I also understand that I must adhere to and uphold a code of conduct whereas I will not engage in unlawful activities, or openly condone the use of illegal substances or illegal activities to include, but not limited to, posts on social media. I agree to maintain the confidentiality of any D-Fy members or policies that I may encounter. If my actions are deemed inappropriate by the D-Fy leadership, I will be dismissed of my duties.*

Signature \_\_\_\_\_ Date \_\_\_\_\_