



# Rosie's Garage 2021-2022 Employment Application

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_ Home/Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Male / Female (Circle One)      Shirt Size: XS S M L XL (Circle One)      Date of Birth: \_\_\_\_\_

Physical limitations  
(Be specific; if none, write none) \_\_\_\_\_

## **VOLUNTEER/EMPLOYMENT EXPERIENCE**

In lieu of completing this section, I have submitted a resume, which shall be attached to this application.

## **IN CASE OF EMERGENCY, PLEASE NOTIFY**

1) Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone \_\_\_\_\_

2) Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone \_\_\_\_\_

## **DRIVING INFORMATION**

If you are volunteering for a position that requires driving, Rosie's Garage requires a valid driver's license and proof of automobile insurance. Are you able to use your automobile if the volunteer position requires one?

Yes \_\_\_\_ No \_\_\_\_

As a volunteer, I agree to provide a valid driver's license number and proof of automobile insurance. I agree to mail or deliver copies of these documents to Rosie's Garage to file with this application. I will immediately notify my volunteer supervisor if my driver's license is restricted, suspended, revoked, or expired.

Insurance carrier \_\_\_\_\_ Policy # \_\_\_\_\_

Driver's License \_\_\_\_\_ State issued \_\_\_\_\_

Expiration date \_\_\_\_\_

**Signature of applicant** \_\_\_\_\_ **Date** \_\_\_\_\_



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## CRIMINAL HISTORY

Have you ever been convicted of a misdemeanor or felony, or are any misdemeanor or felony charges pending against you? Yes \_\_\_\_ No \_\_\_\_

If yes, please explain below. Note, answering yes will not automatically prohibit individuals from becoming volunteers, but will be considered with respect to time, circumstances, seriousness and relationships to volunteer responsibilities. Some volunteer positions may require a background check. If you are selected for one of those assignments, you will be provided with a separate criminal background check authorization form.

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My signature below certifies that all statements made on this application are true, complete and correct to the best of my knowledge and belief. I understand these statements are subject to verification. I understand that falsification on this application can disqualify me from consideration or result in my volunteer services being denied. Furthermore, my signature below provides my authorization to the nonprofit to conduct a driver license and motor vehicle record checks as needed, as well as reference checks to determine my suitability for placement.

I hereby release all parties from any liability for furnishing this information.

## Signature of Applicant

\_\_\_\_\_ **Date** \_\_\_\_\_

## ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

I, \_\_\_\_\_, HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ALL ACTIVITIES ASSOCIATED WITH ROSIE'S GARAGE, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault.

I certify that I am physically fit, have sufficiently prepared or trained for participation in activities at Rosie's Garage, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems which preclude my participation in activities at Rosie's Garage.

I acknowledge that this Accident Waiver and Release of Liability Form will be used by the event holders, sponsors, and organizers of the activities in which I may participate, and that it will govern my actions and responsibilities at said activities.

In consideration of my application and permitting me to participate in activities, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows:

(A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability,



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personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from the sites, activities, events, volunteer/intern/employment, and field trips, ROSIE'S GARAGE and/or their directors, officers, employees, volunteers, representatives, and agents, and the activity holders, sponsors, and volunteers;

(B) INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in ROSIE'S GARAGE and/or their directors, officers, employees, volunteers, representatives, agents, the activity holders, and sponsors, whether caused by the negligence of release or otherwise.

I acknowledge that they are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific activity on their behalf.

I acknowledge that activities, events, volunteerism, internships, and work at Rosie's Garage may involve a test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, lack of hydration, and actions of other people including, but not limited to, participants, volunteers, monitors, and/or producers of Rosie's Garage or it's activities, events, employment of any form. These risks are not only inherent to participants, but are also present for volunteers.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident, and/or illness during my time at Rosie's Garage or its related activities, events, and employment.

I understand while participating in Rosie's Garage, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by the activity holders, producers, sponsors, organizers, and assigns.

I understand that my breaks will be taken as availability arises within the day and is up to the discretion of the management team. A 10-minute break will be provided for every 3.5 hours worked.

I understand that should my behavior, deportment, services, outcomes, or performance not be satisfactory to Rosie's Garage and/or their directors, officers, and management, I can be dismissed and my contract revoked without explanation or pay. I understand that I am responsible for my own actions and behavior and promise to maintain regular consistency in my schedule as defined by Rosie's Garage. Should I violate any rules of conduct, work, volunteer, or intern hours and schedule I understand Rosie's Garage and/or their directors, officers, and management may terminate my services without pay, reference, or explanation.

The Accident Waiver and Release of Liability Form shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

**Participant's Signature** \_\_\_\_\_

\_\_\_\_\_  
Participant's Name

\_\_\_\_\_  
Date