



# VOLUNTEER STATUS FORM

## NON-MEMBER/MEMBER Status Verification Form

To be used in BC only to confirm volunteer status

### SOCIETY MEMBERSHIP (All applicants must complete and include this page in screening package)

Sqn #: \_\_\_\_\_ Date: \_\_\_\_\_ Province: \_\_\_\_\_

I declare that I will support the purposes of the Society, namely to facilitate, support, promote and carry out the activities and programs of the Air Cadet League of Canada with British Columbia. I hereby consent to the collection, use and disclosure of my personal information in accordance with the Privacy Policy of the society. I hereby acknowledge having received and having been given the opportunity to read and understand the Privacy Policy. Further, I agree to undergo the Screening Process as required by the Air Cadet League of Canada.

APPLICANT NAME (PRINT) \_\_\_\_\_

APPLICANT SIGNATURE \_\_\_\_\_

#### Legal name of Society:

I hereby apply to be a **Member** of the Society understanding and acknowledging that I will be a Member with voting status. I will not be active in the day to day business of the Society however I agree to undergo the screening process as required by the Air Cadet League of Canada.

I hereby apply to be a **Member Volunteer** of the Society understanding that I will be an active member with voting status with the Society, actively participating in the day to day business of the Society. I agree to undergo the screening process as required by the Air Cadet League of Canada, understanding this requirement when working with or around the youth of the organization.

### NON-MEMBER VOLUNTEER

I hereby apply to be a **NON-MEMBER Volunteer** understanding that I will be working under the supervision of the Squadron Commanding officer. (No Vote – Not a member of the Society).

I acknowledge that I will support the purposes of the Air Cadet League of Canada within British Columbia. I hereby consent to the collection, use and disclosure of my personnel information in accordance with the Privacy Policy. I hereby acknowledge having received and having been given the opportunity to read and understand the Privacy Policy, as a CI or Non member Volunteer I agree to undergo the Screening process as required by the Air Cadet League of Canada.

### BCPC OFFICE USE ONLY

Date Rec'd \_\_\_\_\_

CARD REG # \_\_\_\_\_

Date of Screening: \_\_\_\_\_

Date of Renewal \_\_\_\_\_

Date of Expiry \_\_\_\_\_

Date Card Sent: \_\_\_\_\_

Document Verification: CRC \_\_\_\_ VSS \_\_\_\_ EPIC \_\_\_\_ JPEG PHOTO \_\_\_\_

(Screening Director to verified Photo Identification )

Screening process verified and completed by: \_\_\_\_\_

Date \_\_\_\_\_

Signature of Provincial Screening Coordinator