APPENDIX A11

ANNUAL CONFIRMATION OF YOUTH VOLUNTEER STATUS AND INFORMATION UPDATE

I understand it is the policy of Delta Sigma Theta Sorority, Inc. that volunteers in Delta's youth activities must undergo background screening every three years to remain a volunteer. In the years that a background check is not required, I understand that I must confirm that my personal information has not changed from the prior year. If any information has changed, I understand that I must provide the updated information.

I also agree that once accepted as a volunteer, I must notify the Chapter immediately if I am the subject of any pending charges and/or convicted of an offense at any time after submitting this application or being cleared as a volunteer. I also further acknowledge that a volunteer with pending charges relating to abuse, neglect, a drug related offense, any crime with the involvement of youth, termination from a paid or volunteer position related to misconduct with a youth, any crime involving violence or recent history of substance abuse, will be terminated as a volunteer.

identification n	umber is listed ir	the box below	v. I have also l	sted in the box	below any pend	se, or state issued ling charges and/o
convictions of a	criminal offens	e against me si	ince being cle	ared as a volunt	eer.	
Please initial yo	ur confirmation	of the following	g:			
	no updated infor cleared as a volu	-		ges and/or convi	ctions of a crim	inal offense agains
Signature:					_	
Print Name:					_	
Date:						
Voor of Initial V	olunteer Annlica	ation:				