

**Delta Sigma Theta Sorority, Incorporated  
Risk Management Manual Forms**

**APPENDIX A11**

**Delta Sigma Theta Sorority, Incorporated  
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.

**Updated Information:** Any changes to my name, address, phone, email, driver's license, or state issued identification number is listed in the box below. I have also listed in the box below any pending charges and/or convictions of a criminal offense against me since being cleared as a volunteer.

**\_\_\_\_\_ I have no updated information or any pending charges and/or convictions of a criminal offense against me since being cleared as a volunteer from the prior year.**

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Chapter: \_\_\_\_\_

Year of Initial Volunteer Application: \_\_\_\_\_ \