

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

Current Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ (Cell): \_\_\_\_\_ (Work): \_\_\_\_\_

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Email address: \_\_\_\_\_

Are you employed?      YES              NO              RETIRED

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Are you currently a student?      YES              NO


Year: \_\_\_\_\_ Major: \_\_\_\_\_ School: \_\_\_\_\_

Highest Level of Education Attained: \_\_\_\_\_ Year Graduated \_\_\_\_\_

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**Volunteer Positions:**

Childcare Assistant       Residential Assistant       Hospital Advocate       Special Projects



1. How did you learn about the volunteer program at True North?

2. Why do you want to volunteer at True North?

3. Do you have any volunteer experience? If so, explain.

4. Do you speak, write and or understand languages other than English?    YES    NO

If yes, what Language(s)? \_\_\_\_\_

5. Do you have other skills that you would like to share? If so, explain.

6. Some volunteer opportunities at True North involve dealing with victims in crisis. What type of crisis intervention training or experience do you have?

7. Have you or anyone you know had a personal experience with domestic violence, dating violence and/or sexual assault? If yes, please explain. **(Optional)**

8. Do you have reliable means of Transportation to and from your volunteer opportunity?

YES

NO



## AVAILABILITY

Approximately how many hours would you like to volunteer per month?

Please note: All volunteers are encouraged to volunteer at least 4 hours per month.

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What length of time do you expect to be able to volunteer for True North?

Please circle one.

3-6 months

6-12 months

Indefinite at this time

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## References (*Not to include relatives*)

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone (Home): \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

## Emergency Contact

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip: \_\_\_\_\_



## Fee

\$30 fee for administrative and material costs.

\$15 for True North student interns and/or service learning students.

## Volunteer Agreement

As an individual who will be volunteering at True North, the following is a statement regarding my time commitment. I commit to volunteer a minimum of \_\_\_\_\_ hours a month. If I am unable to fulfill this requirement due to sickness or an emergency, it is my responsibility to immediately call True North and inform staff. In concordance with this commitment policy, I understand if I do not show for a shift I had previously chosen I will be moved to the inactive volunteer list until I am able to meet with the appropriate Program Head. Of course, exceptions are made for emergency situations. As a volunteer with True North, I appreciate the fact that staff and the people we serve depend greatly on my services. Therefore, if I predict a time period that I may be unavailable to commit to the above amount of hours a month, I will contact the appropriate Program Head ahead of time with my new schedule. I acknowledge that I will be moved to the inactive volunteer list until my schedule allows my return to the active volunteer list.

As an individual who will be volunteering at True North, the following is a statement concerning the confidentiality of information contained in and about this organization that you might learn during your volunteer time. We require that all information you might learn be treated confidentially. Discussing any information with people outside the program can destroy the bond of trust between the participants and True North and will undermine our services.

The location of True North and the identity of any participants in our programs are confidential and may not be shared with anyone outside True North program. A breach of confidentiality is a serious violation of trust and ethical responsibility. It might jeopardize the safety of residents, non-resident participants, staff and volunteers, and thus may be a cause for immediate termination of your status as a volunteer with any True North program and notification will be made to the sponsor/instructor/supervisor of your program.

I understand that my acceptance as a volunteer with True North is subject to a favorable, routine inquiry of local law enforcement records. I authorize True North to complete a Criminal Background Check. I do attest that the information that I have supplied is true to the best of my knowledge. I understand that the provision of false information is grounds for my immediate dismissal from True North's volunteer services. I have also included my Date of Birth and Social Security Number below. This information will be kept confidential by True North staff and only be used for background check purposes.

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

Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_

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### For Office Use Only

Application \_\_\_\_\_ Fees \_\_\_\_\_ Background Check \_\_\_\_\_

Trainings Attended: \_\_\_\_\_