

HOPE HOUSE
Volunteer Application

902 Lafayette Blvd.
Fredericksburg, VA 22401

Phone: (540) 371-0831
Fax: (540) 372-6526

Name: _____

Street Address: _____

City, State: _____

Zip: _____ H Phone: _____

Birth date: ____/____/____ Age: _____ C Phone: _____

❖ Volunteers under the age of 18 are required to have a parent sign the Parental consent Form attached to this application.

Education:

Last year of school completed? _____

Experience:

Do you have any previous volunteer experience? ____ Yes ____ No

If yes, which agencies have you worked with and what were your duties?

Please indicate your availability below:

Day:	<u>Monday</u>	<u>Tuesday</u>	<u>Wednesday</u>	<u>Thursday</u>	<u>Friday</u>
Time:					

What do you consider your areas of expertise (i.e., landscaping, tutoring, office help, cleaning, general help, etc.)?

How do you feel your services could benefit Hope House?

What are some of your hobbies and interests?

Have you ever been convicted of a felony or misdemeanor? _____ Yes _____ No

If yes, what specifically was the conviction?

If yes, what was the date of the conviction? _____

Court Ordered Community Service Volunteers:

What court ordered you to do community service hours?

How many community service hours do you need & by what date do you need to complete them? _____

Volunteers trying to obtain court ordered community service hours are required to provide the following:

Name of contact at court (probation officer/juvenile intake officer, etc) where community service hours were assigned: _____

Phone number of above contact: (_____) _____

EMERGENCY INFORMATION:

Contact person in case of an emergency:

Name: _____

Phone: (_____) _____

Relationship to Applicant: _____

Confidentiality Form

Employees and Volunteers of this organization, Hope House, will not disclose any confidential information acquired from clients or staff except:

With the written consent of the person or persons, or in the case of death or disability of his/her own personal representative, other person authorized to sue, or the beneficiary of an insurance policy on his/her life, health, or physical.

When a communication reveals the privilege by initiating formal charges against the counselor and only in a judicial setting.

When otherwise required by law.

Signature

Date

Volunteer Guidelines and General Information

Guidelines:

1. Upon arriving, volunteers are requested to check-in with the manager on duty and then sign-in in the volunteer sign-in book.
2. If there is an emergency, of any sort, please contact the manager on duty.
3. Volunteers should dress neatly. Casual attire is best since your volunteer work could encompass a variety of tasks. Hope House cannot tolerate any clothing that is revealing or obscene.
4. Profanity and other vulgar language is unacceptable.

General Information:

1. Parking is available in the parking lot beside the building. Parking is also available on the street beside the 7-Eleven.

Volunteer/Staff Discipline Policy

Discipline shall:

- Be constructive in nature;
- Use limits that are fair and reasonable;
- Use positively worded directions; and
- Use diversion, separation, and/or redirection.

Staff and Volunteers should:

- Model acceptable behavior;
- Praise appropriate behavior; and
- Help children to constructively express their feelings and frustrations to resolve conflict.

The following are NOT permitted:

- Spanking, pinching, shaking, roughly handling a child, or forcing a child to assume an uncomfortable position.
- Verbal abuse to include threats, belittling remarks, or statements that may be frightening or humiliating.

Staff and Volunteers should NOT:

- Force, withhold, or substitute food;
- Force or withhold naps;
- Punish a child for toileting accidents;
- Deprive of outdoor activities or other programs;
- Isolation from staff sight/sound; and
- Confinement in a space the child cannot open.

I have read and agree to follow the above discipline policy.

Volunteer Signature	Date
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Hope House Staff Signature	Date
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Volunteer Standards of Conduct and Ethics

Each volunteer is expected to conform to the following criteria:

1. Volunteers are expected to report for their scheduled shift in a timely manner. In addition, volunteers are expected to call in if they are going to be late or are unable to meet their commitment.
2. Volunteers are to strive to keep the area that they are working in free from debris so that the residents' living space is safe.
3. Volunteers are to maintain a "professional" relationship with staff and residents, at all times. Volunteers should not have personal relationships with any resident as long as the resident resides at Hope House.

"Personal" relationships are defined in the following manner:

- There should be no inviting residents to your home, with the exception of special occasions sanctioned by Hope House staff;
- There should be no establishment of a relationship outside of the context of your role as a Hope House volunteer; and
- There should be no intrusive questions with regard to the residents' personal lives and past histories.

I, _____, have read and understand the
(print name)

volunteer standards of conduct and ethics as listed above and I agree to abide by them.

Volunteer Signature

Date

Criminal History Release of Information

In submitting this application I understand that a criminal background check and sexual offender search will be conducted as a condition of volunteer placement within the Hope House. This process helps to preserve the safety and well-being of residents, volunteers and staff. I understand that failure to meet the requirements will result in rejection of application or termination of volunteer position. *Code of Federal Regulations* (sect. 16.34 of Title 28) requires that I am entitled to obtain a copy of my criminal history background check report and can challenge its accuracy and completeness.

I hereby authorize Hope House to obtain a criminal background and sexual offender report based on the true and correct information that I have provided below:

Full Name: _____

 Last First Middle

Aliases/Former Names: _____

Social Security Number: _____ - _____ - _____

Place of Birth: _____

Current Address: _____

Previous Address: _____

Telephone: _____

Release To: *Rappahannock Refuge/ Hope House Inc.*

Signed: _____ **Date:** _____

Parental Consent Form

In order for your child to become a volunteer with us, we need your consent and your involvement in helping them have a productive experience. Please read and sign this parental consent form if you would like us to continue our process of considering your child as a possible volunteer.

Please call _____ at _____

if you have questions, would like further information, or would just like to discuss this with someone.

Name of agency: Hope House

Name of prospective youth volunteer: _____

- 1. Description of anticipated volunteer work:
- 2. Anticipated number of hours per week and schedule for volunteer work:
- 3. Expected duration of volunteer work:

I understand that my child, named above, wishes to be considered for volunteer work and I hereby give my permission for them to serve in that capacity, if accepted by the agency. I understand that they will be provided with orientation and training necessary for the safe and responsible performance of their duties and that they will be expected to meet all the requirements of the position, including regular attendance and adherence to agency policies and procedures. I understand that they will not receive monetary compensation for the services contributed.

Signature: _____ Date: _____

Relationship to volunteer: _____