

# HARBOR INTERFAITH SERVICES, INC.

### **VOLUNTEER APPLICATION**

| Last Name:                          | First Name:                              |   |
|-------------------------------------|--|---|
| Street Address:                     |  |   |
| City:                               | State:                                   | Zip Code:                               |
| Home Phone: ( )                     | Cell Phone: ( )                          |   |
| Email Address:                      |  |   |
| Birthdate:                          | Age:                                     |   |
| How did you hear about the Voluntee | er opportunities at Harbor Interfaith    | Services, Inc.?                         |
| What interest you to become a Harb  | or Interfaith Services, Inc. Voluntee    | er?                                     |
|                                     |  |   |
|                                     |  |   |
|                                     |  |   |
| Have you volunteered for any other  | organizations? Organization -Position -D | ates -Supervisor's Name and Phone Numbe |
|                                     |  |   |
|                                     |  |   |
|                                     |  |   |
| Have you ever volunteered at Harbo  | or Interfaith Services (individual or g  | group)?                                 |
|                                     |  |   |
|                                     |  |   |
|                                     |  |   |
|                                     |  |   |
| For Office Use Only                 |  |   |
| Received Application:(Date)         | Received By: Ac (Initials)               | ccepted: Y N                            |

### AVAILABILITY

Please indicate with a check the date and times that you are available to volunteer. This gives Harbor Interfaith Services, Inc. an idea of your availability and the opportunities that may work with your schedule.

|           | Sun | Mon | Tues | Wed | Thurs | Fri | Sat |
|-----------|-----|-----|------|-----|-------|-----|-----|
| Morning   |     |     |      |     |       |     |     |
| Afternoon |     |     |      |     |       |     |     |
| Full Day  |     |     |      |     |       |     |     |

## GENERAL DESCRIPTIONS OF VOLUNTEER OPPORTUNITIES:

Please check all the positions you are interested in. Most are available on an AS NEEDED BASIS.

| Food Pantry | Clerical Support           |
|-------------|----------------------------|
| School Age  | Shelter                    |
| Preschool   | Transitional               |
| Infant Room | Development/Administrative |

| Describe any interests, hobbies, or skills that are relevant to the volunteer position(s) that interests | st you. |
|--|---------|
|  |         |
|  |         |

| EDUCATION:                   |                  |                                    |   |
|------------------------------|------------------|------------------------------------|---|
| Highest level of education:_ |                  |                                    |   |
| Are you fluent in any langua | ges other than E | English?                           |   |
| EMPLOYMENT HISTORY           | - CURRENT OR     | MOST RECENT POSITION               |   |
| Place of Employment:         |                  |                                    | - |
| City:                        | State:           | Zip Code:                          | - |
| Job Title                    | Duties:          |                                    | ÷ |
| Supervisor's Name:           |                  | Phone Number: ()                   | 2 |
| Employment Dates: From       | To               | 0                                  |   |
|                              | Re               | ı or living with you. elationship: |   |
|                              |                  | nate Phone: ()                     |   |
| Circle one: Personal         | or Professi      | ional Reference                    |   |
| EMERGENCY CONTACT I          | 24               |                                    |   |
| Name:                        | Relat            | tionship:                          |   |
|                              |                  | Zip Code:                          |   |
|                              |                  | Phone: ()                          |   |

#### **ACKNOWLEDGEMENT**

| Have vou ever beer | convicted of a | crime other than | a traffic violation? | YES NO |
|--------------------|----------------|------------------|----------------------|--------|
|--------------------|----------------|------------------|----------------------|--------|

| Please exclude convictions that have been sealed, expunged, or legally erad for which probation was successfully completed or otherwise discharged at A conviction is not an automatic bar to volunteer service. Each case will be If yes, please explain: | nd the case was judicially dismissed.   |
|--|---|
|  |   |
|  |   |
| The information in this application is true and complete, and I have not known   | owingly withheld any information. I     |
| understand that misrepresentation may be cause for dismissal. I authorize v  |   |
| contained in this application.   |   |
| As a volunteer at Harbor Interfaith Services, Inc. I agree to follow all Harbor  | or Interfaith Services, Inc. guidelines |
| and policies. I am aware that Harbor Interfaith Services, Inc. has the right to  | o release me from service at any time   |
| just as I have the right to withdraw from volunteer service at any time. I fur   | ther understand all information         |
| encountered during any of my volunteer work must be kept confidential.   |   |
| one outling any or my volunteer work must be help to make a  | S                                       |
|  |   |
|  |   |
|  |   |
| Applicant's Signature  | Date                                    |

Thank you for your interest in Harbor Interfaith Services, Inc.

# VOLUNTEER CONDUCT AND CONFIDENTIALITY AGREEMENT

| I,                 | , a:   | as a volunteer of Harbor Interfaith   |
|--------------------|--|---|
| Servic             | es (HIS), agree to the following   |   |
| 1.                 | VOLUNTEER CONDUCT While working as a volunteer, I will not drugs, nor will I bring any of these items condition is cause for immediate dismiss   | s onto the premises. Violation of this sal.   |
| 2.                 | I will respect the privacy and dignity of of<br>that abuse or harassment of any kind tow<br>immediate dismissal.   | clients and staff at all times. I understand wards anyone at HIS is grounds for   |
| 3.                 | Lagree to conduct myself in a profession   | l act only within the scope of my volunteer   |
| 4.                 | Lagree to bring any problems or conflict   | ts, with either clients or staff, that are ce or ability, to the immediate attention of   |
| 5.                 | I agree to comply with all policies, proceed and communicated to me via the Volunt   | teedures and regulations established by HIS teer Handbook and general orientation.  |
| 1.                 | CONFIDENTIALITY I understand that in the course of my ser about clients, staff, and donors of HIS, we confidential nature. Examples of such in personal relationships, etc. I understand identity of the individual, must be treated remain confidential even after my service. I understand that personal and confident with appropriate persons on a need to know the service of the individual of t | which are of a highly personal and information are phone numbers, finances, I that all such information, including the ed with total confidentiality and must ce at HIS terminates. |
| Handlalso a functi | by acknowledge that I have received and book and the job description(s) relevant to cknowledge that I have received a proper on, as well as the Volunteer Program's exponent of my services.   | o my specific volunteer assignment(s). It represents to the agency's purpose and expectations of me. I understand that failure  |
| Volur              | nteer Signature  | Date  |
|                    |  |   |
| Volur              | nteer Coordinator  | Date  |

|             | āt .  |
|-------------|---|
| SPECIA      | L SKILLS/EXPERIENCE   |
| 0           | Career/College Planning   |
| 0           | Computer Software -specify  |
| 0           | Counseling -specify   |
| 0           | Finance/Budgeting   |
| 0           | Food Preparation  |
| 0           | Language Spoken -specify  |
| 0           | Sports/Coaching -specify  |
| 0           | Teaching -specify Grade Levels & Subjects   |
| 0           | Tutoring -specify Subjects  |
| 0           | Workshops/Presentation -specify   |
| 0           | Other   |
|             |   |
|             |   |
| SPECI.      | AL INTERESTS/HOBBIES  |
| SPECIA<br>O | AL INTERESTS/HOBBIES  Arts & Crafts   |
|             |   |
| 0           | Arts & Crafts   |
| 0           | Arts & Crafts Computers   |
| 0           | Arts & Crafts Computers Food Preparation  |
| 0 0         | Arts & Crafts Computers Food Preparation Math                                       |
| 0 0         | Arts & Crafts Computers Food Preparation Math Music                                 |
| 0 0 0       | Arts & Crafts Computers Food Preparation Math Music Reading & Story Telling         |
| 0 0 0 0     | Arts & Crafts Computers Food Preparation Math Music Reading & Story Telling Science |