

Volunteer Application
S.A.F.E., Inc.

Name _____ Phone (h) _____ (w) _____

Physical

Address _____ zip _____

Social Security Number _____ U.S. Citizen? Yes No

Date of Birth _____ Employer _____

E-mail address _____

Are you employed? Full Time _____ Part Time _____ Student _____

Area of Interest: Domestic Violence ___ Sexual Assault ___ Child Abuse/Neglect ___

Are you a victim or survivor of?

Domestic Violence ___ Sexual abuse ___ Sexual assault ___ other _____

Times Available to Volunteer: Night _____ Day _____ Weekends _____

Have you received counseling for any type of abuse ? _____ Please explain below .

Why are you interested in volunteering at S.A.F.E.?

Educational Level: _____

EMERGENCY CONTACT;

Name _____ Relationship _____

Home Phone _____ Work Phone _____

Please list three personal references with addresses and phone numbers:

1. _____

2. _____

3. _____

Please list three places of employment:

1. Business _____

Address _____

Job title _____

Reason for leaving _____

2. Business _____
Address _____
Job title _____
Reason for leaving _____

3. Business _____
Address _____
Job title _____
Reason for leaving _____

Have there been any of the following:

- prior abuse or molestation allegations; _____
- incidents, convictions, or pleadings of guilty or “no contest” to misdemeanors; _____
- incidents, convictions, or pleadings of guilty, or “no contest” to felonies? _____

Please, explain any “yes” answers.

I understand that S.A.F.E., Inc. will conduct a mandatory background check prior to my being admitted to the volunteer program. I agree to hold harmless S.A.F.E., Inc. and any reference(s) provided by me should I not be in agreement with the reference.

Signature _____ Date _____

I pledge to keep the location of the S.A.F.E shelter and the names of the clients confidential. I will respect and maintain confidentiality on all information pertaining to clients who seek help from the program. If I violate this pledge, I will automatically be terminated as a volunteer and possibly prosecuted by S.A.F.E.

Signature _____ Date _____

I, _____, am willing to serve as a volunteer for S.A.F.E., Inc. shelter. I agree to release S.A.F.E. from all liability for any injury or personal damage I might receive as a result of my volunteer work with the shelter. If I am unable to come to work, I will contact the Volunteer Services Coordinator or the Executive Director as soon as possible. If I choose to discontinue my volunteer work with S.A.F.E., Inc., I will submit in writing a two week notice.

Signature _____ Date _____

I understand that untruthful answers are grounds for dismissal or refusal of my Volunteer application.

Name _____ Date _____