



VOLUNTEER APPLICATION



REQUIREMENTS FOR VOLUNTEERS

All volunteers must:

- Be at least 18 years of age.
- Fill out an application.
- Schedule an interview.
- Provide three references.
- Agree to a criminal background check.
- Complete the required training when offered.
- Be able to effectively communicate and be understood in English (read, write, and speak).
- Be free of drugs and alcohol while on call.
- Not carry weapons of any sort on CVRCC property while on call.
- Operate within CVRCC's philosophy and mission.
- Abide by the CVRCC job description.
- Sign a CVRCC Volunteer Agreement to maintain confidentiality and professional standards of conduct.
- Record and report all calls received.
- Give two weeks' notice when resigning and attend a brief exit interview with the Director of Volunteer Services.



VOLUNTEER APPLICATION FORM

Please fill out all information.

Date: _____

GENERAL INFORMATION

Name: _____ DOB: _____ SS#: ____ - ____ - ____

Street Address: _____ City / State / Zip: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Okay to call at work? Y N

E-mail: _____

Employer: _____

Emergency Contact: _____ Phone: _____

How proficient are you?

Are you bilingual? Y N Which language?: _____ Read Speak Write

Can you furnish your own transportation? Y N

Which volunteer opportunities with CVRCC are you interested in? Check all that apply.

- | | | | |
|-----------------------|--------------------------|-------------------------------------|--------------------------|
| Hotline | <input type="checkbox"/> | Face-to-Face Crisis Intervention | <input type="checkbox"/> |
| Speaker's Bureau | <input type="checkbox"/> | Law Enforcement/Court Accompaniment | <input type="checkbox"/> |
| Medical Accompaniment | <input type="checkbox"/> | Fundraising | <input type="checkbox"/> |
| Special Events | <input type="checkbox"/> | LGBT+ | <input type="checkbox"/> |

When can you volunteer with CVRCC? Circle all that apply.

Weekdays Evenings Weekends

VOLUNTEER EXPERIENCE

Please list all present and/or past volunteer experience. Use additional sheet if necessary.

Program/Agency: _____ Dates (MM/YY): _____

Position: _____ Supervisor: _____

Program/Agency: _____ Dates (MM/YY): _____

Position: _____ Supervisor: _____

Program/Agency: _____ Dates (MM/YY): _____

Position: _____ Supervisor: _____

Describe your education, training, skills, and talents.

How did you learn about our volunteer program?

What do you hope to gain by volunteering with CVRCC?

How do you feel about working with people who have a different race, religion, or lifestyle than you?

Are you currently on probation or completing court-mandated community service? Y N

If you answered 'yes', please explain:

Have you ever been arrested, charged or convicted of a misdemeanor or felony? Y N

If you answered 'yes', please explain:

REFERENCES

Please list three people who are not relatives.

Name: _____ Phone: _____

E-mail: _____ Relationship: _____

Name: _____ Phone: _____

E-mail: _____ Relationship: _____

Name: _____ Phone: _____

E-mail: _____ Relationship: _____

Please list one person who will always know how to get in touch with you, such as a relative or friend:

Name: _____ Phone: _____

Thank you for your interest in volunteering with Concho Valley Rape Crisis Center. We appreciate your desire to become an advocate for sexual assault survivors, their families and friends. Please note that we will screen each applicant and check his/her references before training. Once we approve an individual for training, he or she must successfully complete the required training course. The Director of Volunteer Services will then determine when a volunteer can work directly with survivors and sign up for a hotline shift. Each candidate has the right to discuss problems or concerns with the Director of Volunteer Services as needed.

Signature

Date



Consent for Criminal Background History Check Authorization/Waiver/Indemnity

I _____, understand that it is the policy of the Concho Valley Rape Crisis Center that each employee, intern and volunteer who is to be screened must sign an authorization/waiver/indemnity form, giving approval to CVRCC to perform the criminal background search. **I hereby give my permission to the Concho Valley Rape Crisis Center to obtain information relating to my criminal history record through established on-line data providers.** The criminal history record, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications. I understand that this information will be used in part, to determine my eligibility for an employment or volunteer position with CVRCC. I also understand that as long as I remain an employee or volunteer, the criminal history records check may be repeated at any time. I understand that I will have an opportunity to review the criminal history and a procedure is available for clarification, if I dispute the record as received.

I, the undersigned, do, for myself, my heirs, executors and administrators, hereby remise, release and forever discharge and agree to indemnify CVRCC and each of their officers, directors, employees and agents harmless from and against any and all causes of actions, suits, liabilities, costs, debts and sums of money, claims and demands whatsoever and any and all attorney's fees, court costs and other expenses resulting from the investigation of my background in connection with my application to become a volunteer, staff member or intern of the Concho Valley Rape Crisis Center.

I understand and agree that if I choose not to provide this information or otherwise refuse to consent and authorize this background check, any volunteer opportunities within the CVRCC will be terminated.

Date of Birth: _____ Social Security Number: _____ - _____ - _____

Driver's License #: _____ Issuing State: _____ Expiration Date: ___/___/___

Other names I have used (including middle names):

States in which I have lived:

Volunteer Signature

Date

Director of Volunteer Services Signature

Date



Pledge of Confidentiality

I, _____, promise that I shall hold in confidence all pertinent information. I will not violate the confidential relationships between the Concho Valley Rape Crisis Center (CVRCC), its Volunteers, related agencies, courts, and all parties interviewed. I will not remove any written records from the office of the CVRCC.

I also understand that any information related to cases and/or clients with whom I come into contact with through records or through direct contact is highly confidential, and I am not to discuss it with any persons other than CVRCC staff and agencies directly related to the investigation of the case while they are at the CVRCC.

I accept full responsibility for maintaining the confidentiality and private nature of all records and information. I understand that I am personally responsible and liable for any violation of this agreement.

Signature

Date



Letter of Commitment

By signing this letter, I hereby agree to the following:

1. To provide compassionate, non-judgmental support to sexual assault survivors in accordance with the Policies and Procedures set by the Board of Directors, for a period of six (6) months from date hereof;
2. To abide by the Policies and Procedures and perform volunteer duties as set out therein;
3. That all proposed actions of any and all committees and/or activities and/or persons must be approved by the Executive Director;
4. That the Executive Director, under the supervision of the Board of Directors, is the head of the volunteer membership and has the authority to dismiss any volunteer for good cause shown and/or failure to comply with the Policies and Procedures and/or By-Laws;
5. To work within the parameters of the By-Laws and the Policies and Procedures of the CVRCC;
6. That my services will be reviewed at the end of one (1) year from the date of the signing of this letter and thereafter as set out in the Policies and Procedures. A special review can be conducted at any time deemed necessary by the Executive Director or the Personnel Committee of the Board of Directors;
7. I also agree that by signing this letter of commitment, I will be a positive influence on other volunteers. If I choose to voice my opinions and objections to any policies, I will do so in writing to the Executive Director or a Board Member. I will join in the spirit of the Center and not only conform to the Center's policies, but support the Center's policies to others.

I further understand that breach of any of the covenants contained in this Letter of Commitment and/or By-Laws and/or Policies and Procedures may result in my immediate dismissal as a volunteer advocate.

SIGNED AND AGREED TO THIS _____ DAY OF _____ 2016.

Signature



Volunteer Code of Ethics

Recognizing the sensitive nature of the work performed at Concho Valley Rape Crisis Center, Inc, all volunteers must adhere to the following general rules while performing services for CVRCC.

In setting forth the following Rules of Conduct, CVRCC acknowledges that it is not possible to list all the forms of behavior that are considered unacceptable in the workplace. The following is merely a guide for volunteers. Any questions about acceptable behavior should be directed to the Advocates and/or Executive Director.

- Must notify CVRCC of any term of deferred adjudication, any arrest within two days, and any guilty plea and/or conviction of violating any laws, federal or state.
- Must be free of any psychological condition that may adversely impact a survivor.
- Must refrain from the use of alcohol at least six hours prior to beginning a shift and must refrain from the use of illegal substances.
- Must treat survivors of all races, religions, cultures, and genders with respect and consideration.
- Must respect the confidentiality and privacy of clients at all times and NEVER compromise that confidentiality by releasing information concerning the agency, clients and/or other volunteers.
- Must not socialize, associate, or provide personal services to any survivor outside the scope of CVRCC responsibilities. There will not be an exception unless approved by the CVRCC Executive Director.
- Must refrain from smoking or use of tobacco products in the presence of children.
- Must report any suspected abuse or neglect of a child to the Texas Department of Protective Regulatory Services and law enforcement agency, as required by the Texas State Law.

I have read and understand the "Volunteer Code of Ethics." I understand that any violation to the above noted conditions may result in disciplinary action, up to and including termination of volunteer status. I am fully aware of the CVRCC Code of Ethics, and I still desire to be a CVRCC Volunteer.

Volunteer's Signature

Date

Advocate's Signature

Date