

# SafeHouse Center Volunteer Application

**Welcome!** Thank you for your interest in volunteering with us. This application is the first step in learning how your skills will best fit with our organization. Please bring this completed application with you to your interview or mail it to SafeHouse Center 4100 Clark Rd Ann Arbor, MI 48105.

Date: \_\_\_\_\_

Please indicate the capacity in which you are most interested in volunteering:

Shelter	DVRT (Domestic Violence Response Team)	SART (Sexual Assault Response Team)	Children	24 Hour HelpLine	Teen Voice (ages 13-18)
Intern	Community Friends	As Needed (skill-based)	Office/Clerical	Speaker's Bureau	Support Group Facilitator

\*What skills are you interested/able to share (mechanic, tax preparation, moving, etc.)? \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Phone 1: \_\_\_\_\_ Phone 2: \_\_\_\_\_

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

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

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

May we add you to the our listserv (to receive email updates about SafeHouse Center )? YES NO

Which is your preferred method of contact? \_\_\_\_\_

What is your occupation? \_\_\_\_\_

If you are currently enrolled in school, what school, year and program are you in? \_\_\_\_\_

**Are you earning course credit for volunteering at SafeHouse Center?** YES NO

**Does your class require on-going crisis intervention, project-based or one-time volunteer experience (circle one)?** ONGOING PROJECT-BASED ONE-TIME

If you need to ongoing crisis intervention volunteering for a class, will you be able to fulfill SafeHouse's Center's six month volunteer requirement (enrollment in a class is **not** an exemption from this requirement)? Y N

Do you speak any languages other than English (incl. ASL)? If so, which? \_\_\_\_\_

What days and times are you available to volunteer? Not sure yet, have to wait for class schedules

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Have you ever volunteered or worked with SafeHouse Center in the past? YES NO

If yes, when and in what capacity? \_\_\_\_\_

The following two questions are for statistical purposes only.

Please circle your highest completed level of education:

Grammar School	HS/GED	2 Yr. Degree Associates	4 Yr. Degree Graduate in	Masters	PhD	Trade/Technical School
----------------	--------	-------------------------	--------------------------	---------	-----	------------------------

How did you hear about SafeHouse Center? \_\_\_\_\_

All DVRT and SART volunteers are required to provide transportation for themselves during their shift. All SafeHouse Center volunteers may be asked to provide transportation for survivors and their children. SafeHouse Center has insurance for medical liability for any survivors and their children while a volunteer is transporting them. However, any vehicle damage or injury to the volunteer will be covered by the volunteer's insurance company. Therefore, please provide the following information:

Car: \_\_\_\_\_ License Plate: \_\_\_\_\_  
Color, Make and Model include state

Driver's License Number (incl. state): \_\_\_\_\_

Car Insurance Company: Allstate \_\_\_\_\_

*If you are unable to provide this information for any reason, you will not be able to transport service participants or their children in your own vehicle. If you are unable to provide a driver's license number, you will be unable to provide transportation in a SafeHouse Center vehicle.*

### **Criminal Background Check**

SafeHouse Center will check the criminal history of **ALL** SafeHouse volunteers with the Michigan State Police.

Please list any other names that you have been known by or have used in the past:

\_\_\_\_\_

Have you ever been convicted of a crime? YES NO

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Note: A criminal record will not necessarily disqualify an applicant. A criminal history is one piece of information that will be considered in determining the appropriateness of an individual to be a volunteer.

### **Health Issues**

You will be exposed to common contagious diseases while volunteering with SafeHouse Center. In addition to colds and the flu, diseases you are exposed to may include chicken pox, measles, mumps, and rubella. You may also encounter scabies and head lice. Some of these diseases are particularly dangerous for pregnant women. We strongly encourage all volunteers to get immunizations for tetanus and hepatitis B, and to get tested for tuberculosis annually. Immunization and testing services are free to volunteers at SafeHouse Center. Please speak to your supervisor for more information about immunizations, or if you have concerns about these health issues.

### **Recommendation Letters and Verification of Volunteer Service**

We are happy to provide letters of recommendation for volunteers who have volunteered with us for six consecutive months. We will also gladly verify an individual's volunteer service if we have adequate information that the reported hours are accurate.

#### **Please read and sign:**

I have answered the questions on this application the best of my knowledge, and none of the answers are knowingly false. I meet the organization's requirements for volunteering, as explained elsewhere. I give permission for a criminal background check. I understand that I will be exposed to contagious diseases while volunteering and acknowledge that I have been encouraged to get vaccinations available at SafeHouse Center. I understand the policy regarding recommendation letters and verification of volunteer services. I understand that by volunteering here, that I agree to abide by all SafeHouse Center policies, especially those regarding confidentiality and security. These policies will be further explained to me elsewhere.

Signature \_\_\_\_\_

Date \_\_\_\_\_



**Please copy this page for volunteer.**