



Volunteer Application

Contact Information

First	Middle	Last
Street Address		Apt#:
City	State	Zip
Cell Phone	Home Phone	
Email	DOB (Month & Date Only)	

Please describe any relevant work, volunteer or personal experience or training:

Please describe your reason(s) for wanting to volunteer with the Victim Service Center:

Volunteer Application

What day(s) and hours are you available to volunteer? Please provide the hours below. Check Not Available if you are unavailable during the day. Hours may vary due to assignment.

Sunday		<input type="checkbox"/> Not Available
Monday		<input type="checkbox"/> Not Available
Tuesday		<input type="checkbox"/> Not Available
Wednesday		<input type="checkbox"/> Not Available
Thursday		<input type="checkbox"/> Not Available
Friday		<input type="checkbox"/> Not Available
Saturday		<input type="checkbox"/> Not Available

Volunteer Opportunities

Please indicate your interest with: 1 – first choice, 2 – second choice, 3 – third choice

___ Programs and Services – Support the Advocacy department, including Sexual Assault and Crime Victim Advocates

___ Outreach and Prevention - Attend tabling events, provide information on services and programs, set up and break down equipment.

___ Administration – Help staff with filing, making copies, and miscellaneous administrative duties.

___ Marketing - Assist with the planning, development, and implementing of marketing materials. Maintain VSC's brand and share the mission, vision, and values through all media platforms.

___ Volunteer Work Group – Assist with the supervision of groups larger than 5 in activities assigned by the VSC staff.

___ Special Events – Help with the planning and day-of-event activities.

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Please list two references- (1) Professional and (1) Personal/Academic.
Phone number and email are required.

Name _____ Relationship _____

Email _____

Phone Number # 1 _____

2 _____

Name _____ Relationship _____

Email _____

Phone Number # 1 _____

2 _____

Volunteer History

Have you ever been convicted of a felony or misdemeanor other than minor traffic violations, and/or been placed on probation, fined or given a suspended sentence in court? Include any convictions in military court and any criminal charges for which you are awaiting trial. List all cases other than minor traffic violations. (Driving under the influence, reckless driving or hit-and-run ARE NOT MINOR traffic violations). Your fingerprints may at some point be sent to state and federal agencies and all service will be subject to satisfactory review of any criminal convictions.

PLEASE NOTE: A full disclosure by you is to your advantage as your record does not constitute an automatic bar to service. Factors such as but not limited to your age at the time of the offense(s), type of offense(s) as well as the relationship between the offense(s) and the job(s) for which you apply will be taken into account. However, failure to admit convictions will result in disqualification.

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Does the above paragraph apply to you? Yes No

If yes, please explain in detail:

Have you ever had a criminal record sealed and/or expunged?

Yes No

If yes, please explain in detail:

Volunteer Agreement

I certify that all the information contained in this application is correct and complete to the best of my knowledge. I understand that falsification of this application in any detail is grounds for disqualification for further consideration or dismissal from service. I hereby authorize investigation of all statements I have made herein. I authorize the persons or companies herein referenced to give information regarding my past employment, together with any information that they have regarding me, whether or not it is in their records. I hereby release said persons and companies from all liability for any damages whatsoever resulting from issuing or obtaining this information. Additionally, I am not currently serving on the governing entity and understand that no preferential treatment will be given in applying for the volunteer program. If selected to serve with the Victim Service center, I agree to comply by all its policies, procedures, rules and regulations.



Volunteer Application

I have read and received a copy of the Victim Service Center volunteer job descriptions.

Date _____

Applicant's Name (Please print) _____

Applicant's Signature _____

I have read, received a copy of, and agree to abide by the Victim Service Center volunteer manual.

Date _____

Applicant's Name (Please print) _____

Applicant's Signature _____