

**VOLUNTEER APPLICATION** 

Email: volunteer@staffordjunction.org

Phone: 540-368-0081

## Rev 6/8/23

## Thank you for your interest in Stafford Junction

Volunteer positions support the work of Stafford Junction, a faith-based nonprofit, charitable organization, please complete the application below.

- Be sure to write legibly.
- The application must be completed in full.
- Read and sign the last page of the application.
- If the applicant is under 18 years of age, a parent or legal guardian signature is required.

Office Use Only
Background Check:
Entered into Database:
Orientation/Training:
Agreement/Manual:

The criteria used in the selection of volunteers will be to ensure the individual can meet the confidentiality requirements of Stafford Junction. No individual will be rejected because of race, color, religious creed, national origin, sex, age, or marital status.

Personal Information		
First Name Mid	ddle Initial Last Name	
Street Address		
City		State Zip
Home Phone	Cell Phone	
Email		
What is your age Date of Birth	· · · · · · · · · · · · · · · · · · ·	
Do you have a driver's license? ☐ Yes ☐ I	No	
If not, who will be responsible for your trans	sportation?	
Can you perform the essential functions of t reasonable accommodation?   Yes   No		h you are applying, with or without
Primary Spoken Language	Other Spoken Langua	ges
Emergency Contact	Relation	Phone
Emergency Contact	Relation	Phone
Please list any allergies or health concerns w	we need to be aware of	
Please explain why you are interested in bed	coming a volunteer with Staffo	ord Junction:

Allegations or suspicions of child abuse are taken very seriously and will be reported to the proper authorities for investigation. We have abuse reporting procedures, there are unscheduled visits from supervisors, we have an open door for parents, and we have a code of conduct for staff. We minimize opportunities for abuse to occur and we speak with children about personal safety and touching limits. We also screen carefully to prevent abusers from being hired and we provide child abuse prevention training to staff.

Volunteer In	nterests & Av	ailability					
<ul> <li>□ Tutoring (Brain Builders)</li> <li>□ Site Coordinator (Brain Builders)</li> <li>□ Onsite Child Care (Lifeskills, Healthy Living Pays)</li> <li>□ Van Drivers (All Programs)</li> <li>□ Workshop Featured Presenter (All Programs)</li> <li>□ Field Trip/Activity Chaperone (All Programs)</li> <li>□ Gardening / Landscaping</li> <li>□ Office &amp; Clerical</li> </ul>			g ms) ns)	<ul> <li>□ Group Leader K – 2<sup>nd</sup> Grade (Summer Junction)</li> <li>□ Group Leader 3<sup>rd</sup> – 5<sup>th</sup> Grade (Summer Junction)</li> <li>□ Sports Activities (Summer Junction)</li> <li>□ Arts &amp; Crafts (Summer Junction)</li> <li>□ Science &amp; Nature (Summer Junction)</li> <li>□ Math (Various Programs)</li> <li>□ Reading (Various Programs)</li> <li>□ Other</li> </ul>			
List available of Sunday	Monday	Tuesday	Wedr	nesday	Thursday	Friday	Saturday
20.1.007	,			,	, ,		- Caron day
Volunteer Posi	tion Applying for	•	Date Available				e Available
Minimum Hours requested? Maximum Hours Have you previously been employed by or volunteer							Yes □ No
If yes, when?	In which capacit	y?					
How did you h	How did you hear about this opportunity?						
Volunteering	Experience &	Training					
Volunteerii	Volunteering Experience						
Cofety 9 1e	h Crocific Com	tifications					
	b Specific Cer						
Type (CPR,	First Aid, CDA, 6	etc.) Pro	ovider		Level		Expiration
Personal Refe	erences						
						Years Know	 vn
NameAddress						 Zip	
Email						_ <b>-</b> ۲	
							vn
Address							
Fmail			City State Zip Phone				

Disclosures & Waivers
PLEASE READ ALL STATEMENTS AND SIGN BELOW:
All Volunteers aged 18 and over will undergo a basic background check (at no cost to you). An email will be sent to you with the link to submit your information.  1. Do you currently use illegal drugs?  \[ Yes \] No If yes, explain
<b>BACKGROUND CHECK AUTHORIZATION:</b> I certify that all information provided by me in this application is correct to the best of my knowledge. I authorize Stafford Junction to contact my references and to conduct a comprehensive review of my background report to be generated for volunteering purposes.
I understand that the scope of the report may include, but is not limited to, the following areas: verification of social security number, current and previous residences, employment history, education background, character references, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions, birth records.
Stafford Junction shall maintain all information received in a confidential manner to protect the applicant's personal information including, but not limited to, addresses, social security numbers, and dates of birth.
<b>CONFIDENTIALITY:</b> As a volunteer of Stafford Junction, I understand that as part of my work I may, at times, have access to information that is considered confidential. I acknowledge my responsibility to respect and not share confidential information pertaining to the families Stafford Junction serves. I understand failure to follow these procedures may result in dismissal as a volunteer and possible legal action.
<b>PHOTOGRAPH &amp; VIDEO WAIVER:</b> I acknowledge that Stafford Junction may utilize photographs or videos of participants including volunteers that may be taken during involvement in Stafford Junction activities. This includes internal and external use including but not limited to Stafford Junction's website, Facebook, and publications. I consent to such uses and hereby waive all rights of compensation. If I do not wish my image to be included in the above mentioned, it is my responsibility to exclude myself from photographs or videos taken during such activities.
<b>RELEASE FROM LIABILITY:</b> I hereby release Stafford Junction from all claims, actions, lawsuits, or demands of any kind arising out of my participation in any activity where I am participating as a volunteer.
<b>ACKNOWLEDGEMENT:</b> I certify that all information provided by me in this application is correct to the best of my knowledge. I understand that the falsification or omission of any facts in this application will result in the denial of/termination of volunteer opportunities, regardless of the timing or circumstances of discovery. If hired as a volunteer, I agree to always abide by Stafford Junction policies and rules. I acknowledge that I have read the above statements and understand them.
Signature Date
If applicant is under 18 years of age: Parent or Legal Guardian Signature Date Date
Printed Name Phone