

Grace Ambassadors Volunteer Application

PLEASE PRINT ALL INFORMATION

Application Date: _____

Name: _____ **Birthday (Mo/Day/Yr)** _____

Address: _____
Street City State Zip

Cell Phone: _____ **E-Mail Address:** _____

Parent/Guardian Information

- **Full Name:** _____
- **Phone Number:** _____
- **Email:** _____

Emergency Contact (If different from parent/guardian)

- **Full Name:** _____
- **Relationship to Applicant:** _____
- **Phone Number:** _____

Check All Areas you are interested in:

- Peer Education & Awareness (speaking, sharing resources)
- Social Media & Content Creation (helping with campaigns)
- Community Outreach & Events (helping at booths, school events)
- Leadership & Advocacy (mentoring, organizing initiatives)
- Other (please specify): _____

1. Why do you want to be a Grace Ambassador?

2. What strengths or skills can you bring to this program?

3. What does "Respect is the Standard" mean to you?

Signature of Ambassador _____ Date _____



VOLUNTEER CODE OF ETHICS & RELEASE OF LIABILITY

As a volunteer of The Grace Center, I agree with the following:

- To maintain the client's interest as primary responsibility.
- To respect privacy at all times and never release confidential information of clients, staff, volunteers, student interns and board members regarding personal information and information obtained while providing services, except as otherwise required by law or judicial order.
- Volunteers must maintain healthy relationships with clients by avoiding dual relationships.
- Not to use, possess, or be under the influence of alcohol or illegal drugs. These actions will not be tolerated while volunteering for the GCOF.
- Any type of abuse will not be tolerated towards clients, children, or staff.
- To maintain a professional relationship and respect with clients, staff, and volunteers.
- To provide only those services in which I have been trained.
- If I am unable to fulfill a volunteer duty for which I committed, I will contact the appropriate GCOF staff member with that information as soon as possible.
- I will attend training as required by the GCOF.
- Texas State law requires me to report any suspected abuse or neglect of a child. If this occurs, I shall inform the executive director and make a report to the Texas Department of Family and Protective Services at 1-800-252-5400 or www.txabusehotline.org.
- I understand that when using my personal vehicle while volunteering, my personal insurance is primary and the GCOF assumes no liability or responsibility whatsoever. I will not be reimbursed by the GCOF for mileage, but I can report it as a donation to the Shelter.
- I agree to hold the GCOF, its staff, employees, interns, agents, volunteers, contributors, officers, and directors harmless from any and all claims, demands, debts, responsibilities, and/or liability relating to me, my children, or those accompanying me.

PLEASE INITIAL THAT YOU'VE READ THE ABOVE CODE OF ETHICS & RELEASE OF LIABILITY: _____

VOLUNTEER SOCIAL MEDIA AGREEMENT

In general, The Grace Center (GCOF) views social networking sites (e.g. Facebook), personal websites, and blogs positively and respects the right of volunteers to use them as a medium of self-expression. If a volunteer chooses to identify himself or herself as associated with GCOF on social media, some readers of social media may view the volunteer as a representative or spokesperson of GCOF. In light of this possibility, GCOF requires that volunteers observe the following guidelines when referring to GCOF on social media.

- Volunteer must be respectful in all social media related to or referencing GCOF, its employees, and other volunteers.
- The GCOF logo and trademarks may not be used without explicit permission in writing from the Executive Director.
- Volunteers must not reference clients and must respect the confidentiality of the Shelter and its services.
- Volunteers and staff must not use social media to disparage GCOF.
- Volunteers must not use social media to harass, bully, or intimidate other volunteers or employees of GCOF. Behaviors that constitute harassment and bullying include, but are not limited to comments that are derogatory with respect to race, religion, gender, sexual orientation, color, or disability; sexually suggestive humiliating, or demeaning comments; and threats to stalk, haze, or physically injure another person.

PLEASE INITIAL THAT YOU'VE READ THE ABOVE SOCIAL MEDIA AGREEMENT: _____

ACKNOWLEDGEMENT & SIGNATURE

By signing below, I _____ certify that I have read and understand the Volunteer Code of Ethics & Release of Liability and Social Media Policy. I agree to abide to the conditions stated within and any violation may be grounds for termination of volunteer status and possible civil liability.

Signature of Volunteer

Date

Signature of Parent or Legal Guardian (if under 18 years of age)

Date

VOLUNTEER AGREEMENT OF CONFIDENTIALITY

GCOF is committed to the confidentiality of all information regarding its clients as a means of ensuring their safety. Confidentiality is defined as the assurance that access to information regarding any client shall be strictly controlled, and that violation of such control shall be a breach of faith. Confidential information shall include but is not limited to:

- Communications, information and observations made by, between or about adult and child clients, staff, volunteers, student interns and board members.
- Addresses of employment, residence and family addresses of clients, staff, volunteers, student interns and board members.
- Names of clients, staff, student interns and volunteers, unless written permission is provided by the individual and approved by the Executive Director.
- Photographs taken of clients, staff or volunteers.

Confidential information shall not be released over the phone or in person, about the Shelter and its clients without the expressed permission of the Executive Director or a designated staff member. This includes release of information to board members, criminal justice personnel, family members, community supporters or other interested parties.

GCOF staff and volunteers shall be committed to protecting the overall health of the organization and should not divulge administrative information including but not limited to personal, funding or donors without the expressed permission of the Executive Director. The release of any confidential information without consent may result in immediate termination.

Volunteer (please print)

Signature

Date

Signature of Parent or Legal Guardian (if under 18 years of age)



Parental Consent & Agreement

As the parent/guardian of (Teen's Name), I give permission for my child to volunteer with The Grace Ambassadors Program under The Grace Center of Fredericksburg. I understand that this program is designed to educate and empower youth about healthy relationships, self-care, and advocacy.

I acknowledge that my child may participate in:

- Group Meeting and Discussion
- Community outreach and awareness events
- Social Media Campaigns (No personal information will be shared without additional consent)
- Volunteer opportunities with The Grace Center

Photo/Media Release (Check One):

- I give permission for my child to be photographed/video recorded for program-related materials and social media.
- I do not give permission for my child to be photographed/video recorded.

Liability Release:

I release The Grace Center of Fredericksburg, its staff, and volunteers from any liability in the event of injury or accident while participating in Grace Ambassador activities. In the case of a medical emergency, I authorize program leaders to seek necessary medical care for my child.

Parent/Guardian Signature: _____ Date: __/__/____

Teen Volunteer Signature: _____ Date: __/__/____