



# Volunteer Application

For Office Use Only:
Date Interviewed: _____
Date Submitted: _____

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

## Contact Information

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Gender: Male  Female

Church Attended: \_\_\_\_\_ Cherry Street Attendee: Yes  No

Former Cherry Street Experience: \_\_\_\_\_

## Current Volunteer or Employment Information

Employer: \_\_\_\_\_ Years employed: \_\_\_\_\_ Retired? Yes  No

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Job Title: \_\_\_\_\_ Duties: \_\_\_\_\_

Previous VOLUNTEER Experience: \_\_\_\_\_

## Highest Educational Background:

High School attending/attended: \_\_\_\_\_ Years Completed: \_\_\_\_\_ Graduation Date: \_\_\_\_\_

College Name: \_\_\_\_\_ Graduation Date: \_\_\_\_\_ Degree: \_\_\_\_\_

Any Special Talents or Tasks: \_\_\_\_\_

Licenses: \_\_\_\_\_

Have you ever been convicted of a crime, excluding misdemeanors? No Yes (if yes, explain)

Are you required to serve school or court ordered community service? No Yes (if yes, explain)

If selected for our volunteer program, with what <b>age group</b> would you like to work?			
	<b>K-2<sup>nd</sup> Grade</b>	<b>3<sup>rd</sup>-5<sup>th</sup> Grade</b>	<b>Middle School</b>
If selected for our volunteer program, what <b>day(s)</b> of the week would you most likely be available?		<b>M - T - W - Th - F</b>	
If selected for our volunteer program, what <b>time(s)</b> of the day would you most likely be available?			
Honey Do's	Prayer Days	Line Leaders	PACS
Music Worship	Classroom Volunteers	Food & Nutrition Services	(People Assisting Cherry Street)
Middle School Leaders	Homework Volunteers	Eden (Garden)	

**If Under the Age of 18**

Parent/Guardian Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_  
Parent/Guardian Name Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**References**

Please list at least three individuals we may contact regarding your application to volunteer excluding family and close friends. References will be verified.

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Circle one: Supervisor Pastor Instructor Co-Worker Other

Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Contact Address: \_\_\_\_\_  
*Street City State ZipCode*

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

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Circle one: Supervisor Pastor Instructor Co-Worker Other

Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Contact Address: \_\_\_\_\_  
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Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

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Name: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Contact Address: \_\_\_\_\_  
*Street City State ZipCode*

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

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How did you hear about us?

Internet Presentation Print Radio Television

Volunteer Policies

- Volunteers are expected to keep their commitments and show integrity in all interactions with staff and children.
  - Volunteers are to bring any concerns or conflicts with children or staff to the Program Director for review and handling.
  - Volunteer Worker may complete hours based upon Cherry Street needs.
  - You must notify staff (one) 1 hour prior to your assigned shift, if you are unable to show up.
  - If you have any fraternization problems with any staff or other volunteers, you will be terminated.
  - If you break confidentiality policies, you will be terminated.
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Confidentiality Agreement

I, \_\_\_\_\_, as an individual doing volunteer work at Cherry Street Youth Center in Chanute, KS, I hereby agree to protect the privacy of the children (both present and past) and staff about whom I obtain information.

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Volunteer Signature**

Worker Contract

I understand that if I become a volunteer for Cherry Street, I am representing a non-profit organization when doing work for Cherry Street. When I am carrying out volunteer work, I shall not engage in activities that are prohibited to a nonprofit or tax exempt organization. I shall not profit by my activities as a volunteer. I shall not represent Cherry Street in any type of political activity, such as endorsing or condemning candidates for office or political initiatives. I understand that I am to be held personally liable for any direct consequences of such misrepresentation. In addition, I hereby forever release, discharge and agree to old harmless and indemnify Cherry Street Youth Center, Inc., its board of directors, officers and agents from all claims, demands, actions, cause of action or liability of any kind whatsoever arising as a result of my doing volunteer work with Cherry Street.

I agree to be present at my assigned shift and abide by the Cherry Street Policies. Cherry Street is void of any liability in the event of an injury while completing assigned tasks. Cherry Street staff or other volunteers may transport me in their private vehicles and are devoid of liability in the event of an accident.

I understand there is no monetary compensation for my time unless I have a signed statement of employment from Cherry Street.

I agree to have a willingness to work and complete all assigned tasks. I agree to have a positive attitude towards staff and children. If I find that I cannot follow, or that I disobey the guidelines, I will seek volunteer responsibilities elsewhere.

I agree that as a Cherry Street Volunteer, I will hold confidential any and all information I learn in my work concerning Cherry street children, volunteers or staff. I understand I may need to undergo training in order to participate in certain activities, and I agree to abide by the guidelines provided in any such training.

By signing below, I am signifying I am in agreement with Cherry Street policies and procedures and will follow the guidelines and procedures pertinent to me as a volunteer for Cherry Street.

Cherry Street is committed to providing a work environment that is free of harassment, whether it be because of age, religion, sexual, racial, ethnic or national origin.

I affirm that I have read and understand the statements on this form and agree to abide by these statements as written.

Executed on this **date:** \_\_\_\_\_, 20\_\_ in Chanute, KS

\_\_\_\_\_  
**Volunteer signature**

\_\_\_\_\_  
Cherry Street Executive Director signature

**If under the age of 18, your parent or guardian's signature is required.** Age (if under 18): \_\_\_\_\_

As parent or guardian, I have discussed with my child the above policies and have encouraged my child to fulfill their commitment to Cherry Street Youth Center.

**Authorized Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_ **Contact phone number:** \_\_\_\_\_