



THE SALVATION ARMY
OF LEE AND HENDRY COUNTY
VOLUNTEER APPLICATION

Please Check One: [] Volunteer [] Student Community Service [] Intern [] State/DJJ Court-Ordered Community Service

Volunteer Profile

[] Mr. [] Mrs. [] Ms. Are you age 21 or older? [] Yes [] No (Age 14 must be accompanied by an adult)

First Name (If group, please identify group leader's name here) Last Name

Permanent Address

Street/PO Box City State Zip

Seasonal Address

Street/PO Box City State Zip

If seasonal, indicate months in Florida & available to volunteer: From: To:

[] Business [] Organization [] Church [] Civic Group # of volunteers in group:

Name:

Street/PO Box City State Zip

Would you like to schedule a group tour of our facility? [] Yes [] No
Would you like to schedule a Salvation Army representative to speak at your group meeting? [] Yes [] No

Contact Information

Home Phone Business Phone Cell Phone
Fax Email Address Other

Volunteer Opportunities: (Please check all categories in which you would like to volunteer.)

YEAR-ROUND OPPORTUNITIES

- Administration: [] Bulk Mailings [] Answer Phones [] Clerical/Filing [] Data Entry*
Family Store: [] Sort Clothes [] Stock Merchandise [] Price Merchandise [] Cashier*
Family Unit: [] Read to Children* [] Library Assistant [] Nursery Worker*
Food Pantry: [] Sort/Stock Food [] Bag Groceries [] Client Intake [] Steward
Food Services: [] Food Service [] Stock Food [] Cleaning
Maintenance: [] Landscaping [] Janitorial [] Facility Maintenance [] Equipment Repair
Warehouse: [] Sort Clothes [] Appliance Repairs [] Clean-up
Meals With Compassion: Days Interested:
[] Monday [] Tuesday [] Wednesday [] Thursday [] Friday [] Saturday [] Sunday
I can volunteer unlimited hours as a Volunteer Coordinator Assistant: [] Yes [] No

YEAR-ROUND TRAINING OPPORTUNITIES

- Professional: [] Tutoring [] Training/Workshops Type:
Computer Training: [] Basic Computer [] MS Word [] MS Excel
[] MS Publisher [] MS PowerPoint [] MS Access

DISASTER SERVICES

- Pre-Event: [] Answer Phones [] Clerical [] Training
Post-Event: [] Food Preparations [] Hospitality Center [] Stock Food
[] Serve Meals [] Sort Donations [] Stock Food
[] Procurement [] Warehouse
I can volunteer unlimited hours as a Disaster Emergency Relief Team (DERT) Leader: [] Yes [] No

CHRISTMAS PROGRAMS

Kettle Campaign:

- Bell Ringer (Individual)
 - Kettle Coordinator*
 - Kettle Counter*
 - Kettle Musician
 - Bell Ringer (Group)
 - Kettle Sponsor
 - Area Coordinator*
 - Individual
 - How Many in Group? _____
 - Kettle Driver*
 - Preferred Coordinator Location: _____
 - Group # in Group _____
- I can volunteer unlimited hours to assist with the Christmas Kettle Campaign. Yes No

**Christmas Cheer
Registration and Toyland
Distribution:**

- Registration
 - Data Entry*
 - Toy Sorting
 - Stuff Stocking
 - Hospitality Center
 - Bulk Mailing
 - Applications
 - Toyland Set-up
 - Stock Tables
 - Toyland Worker
 - Curb Service
 - Clothing Center
 - Translator Spanish Creole
 - Toyland Clean-up
 - Food Packing
 - Assist parent-shopper in Toyland
 - Parking/Traffic Control
- I can volunteer unlimited hours as a Christmas Cheer Team Leader: Yes No

Holidays:

- Serve Thanksgiving Meal
- Stocking Sponsor
- Angel Tree Sponsor
- Serve Christmas Meal
- # of stocking needed: _____
- # of angels needed: _____
- Adopt-a-Family

Sponsor Christmas Party for program participants: Family Unit Medical Unit Crossroads Recovery
(Holiday volunteers will be contacted directly by the department(s) they have selected in this category.)

Day(s) & Time Preferences (Check all that apply)

- Monday Tuesday Wednesday Thursday Friday Saturday Sunday
- Morning Afternoon Evening

Community Service/Intern Information

If Intern or Community Service, # of hours needed: _____

If Intern, specify field of study or department you would to volunteer in: _____

Thank you for volunteering your time and talents to help others!

Acknowledgement

I understand that The Salvation Army is a religious and charitable organization and requires the assistance of volunteers in carrying out its various spiritual and social programs. As a volunteer, I agree to perform all assignments with the highest level of professional and ethical conduct and confidentiality. I understand that I will not be compensated for services performed as a volunteer. Should I volunteer in any area requiring a background check I agree to complete the applicable forms; and I understand I cannot begin volunteering in that area until all background checks are approved by The Salvation Army.

Signature (If emailing, please type in name.)

Date

***Must pass applicable background checks.**

Office Use Only

- Entered in Database
- Assigned Volunteer Position
- Position Assigned: _____
- Team Leader area of interest: _____
- Holiday Volunteer referred to: _____
- Intern referred to: _____
- Attended Volunteer Orientation
- Community Service Notice Sent
- Logged in Training Schedule
- Canteen Notice Sent
- Notice Sent



The Salvation Army of Lee & Hendry County

Volunteer Resources

Name _____

Dear Volunteer Applicant,

- ♥ Please take a moment to complete the skills questionnaire.
- ♥ We will discuss at your interview which skills you prefer to utilize as a volunteer.
- ♥ Please mark your skills by placing an "X" in the appropriate box.
- ♥ Feel free to write in any skills not listed.

<u>Clerical</u>	<u>Skill</u>	<u>Retail/Business</u>	<u>Skill</u>	<u>Other Skills</u>	<u>Skill</u>
Computer	<input type="checkbox"/>	Cashier	<input type="checkbox"/>	Acting/Singing	<input type="checkbox"/>
Copier	<input type="checkbox"/>	Customer Relations	<input type="checkbox"/>	Arts & Crafts	<input type="checkbox"/>
Fax	<input type="checkbox"/>	Display	<input type="checkbox"/>	Carpentry	<input type="checkbox"/>
Filing	<input type="checkbox"/>	Manager	<input type="checkbox"/>	Construction	<input type="checkbox"/>
Mailings	<input type="checkbox"/>	Marketing	<input type="checkbox"/>	Cooking/Baking	<input type="checkbox"/>
Phones	<input type="checkbox"/>	Sales	<input type="checkbox"/>	Counseling	<input type="checkbox"/>
Receptionist	<input type="checkbox"/>	Other	<input type="checkbox"/>	Driver	<input type="checkbox"/>
Shorthand	<input type="checkbox"/>			Educator	<input type="checkbox"/>
Other	<input type="checkbox"/>			Electrical	<input type="checkbox"/>
		<u>Financial</u>	<u>Skill</u>	Emergency Svcs.	<input type="checkbox"/>
		Accounting	<input type="checkbox"/>	Engineering	<input type="checkbox"/>
<u>Communication</u>	<u>Skill</u>	Banking	<input type="checkbox"/>	Flowers/Plants	<input type="checkbox"/>
Customer Service	<input type="checkbox"/>	Billing	<input type="checkbox"/>	Fundraising	<input type="checkbox"/>
Foreign Language	<input type="checkbox"/>	Bookkeeping	<input type="checkbox"/>	Housekeeping	<input type="checkbox"/>
Specify _____		Collections	<input type="checkbox"/>	Human Resources	<input type="checkbox"/>
Photography	<input type="checkbox"/>			Needlework	<input type="checkbox"/>
Public Speaking	<input type="checkbox"/>			Legal Service	<input type="checkbox"/>
Sign language	<input type="checkbox"/>			Musician	<input type="checkbox"/>
Training	<input type="checkbox"/>			Parenting	<input type="checkbox"/>
Writing/publishing	<input type="checkbox"/>			Real Estate	<input type="checkbox"/>

Program Skill Level	Beginner	Intermediate	Skilled
Word	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Excel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Power Point	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Publisher	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please list any other skills or experience you may have below:



The Salvation Army of Lee & Hendry County

Volunteer Code of Ethics

As a volunteer for The Salvation Army Lee & Hendry County Command, I will strive to adhere to the following code:

1. I will keep confidential matters confidential.
2. I interpret "volunteer" to mean that I have agreed to work without compensation in money. Having been accepted as a worker, I expect to do my work according to highest standards.
3. I promise to approach my work with an attitude of open-mindedness; to be willing to be trained for it; to bring to it interest and attention.
4. I realize that my skills may differ from my co-workers. I will do my best to establish teamwork realizing that a variety of skills are necessary to build a strong team.
5. I plan to find out how I can best serve the activity for which I have volunteered, and to offer as much as I am sure I can give.
6. I realize that when I agree to participate in a volunteer activity that I have made a commitment to the agency.
7. I believe that my attitude toward volunteer work should be professional. I believe that I have an obligation to my work, to those who direct it, to my colleagues, to those for whom it is done, and to the public.
8. I will handle all donations with integrity and honesty including monetary and in-kind donations. I will ensure that all donations in their entirety are directed and received where intended.

I agree with this code and will do my utmost to uphold it.

Print Name _____

Signature _____

Date _____



THE SALVATION ARMY

LEE & HENDRY COUNTY COMMAND



STATEMENT OF CONFIDENTIALITY FOR VOLUNTEERS

I realize that in the course of my time in a Salvation Army facility, I may be exposed to clients or client's names and other confidential data regarding agency clients. I understand that any and all client data is confidential under Florida Statute, Chapters 394.459 (9) and the Code of Federal Regulations, Part 2, Title 42. Violations of state and federal statutes can carry both civil and criminal penalties.

I further understand that no names or information about Salvation Army clients can be discussed with non-Salvation Army employees.

My signature acknowledges my agreement to abide by all agency confidentiality regulations and applicable laws. My signature acknowledges that I agree to sign in with The Salvation Army front desk and received the appropriate name tag identification each time that I volunteer; I agree to wear the name tag at all times while in any Salvation Army facility. I also agree that I will notify the front desk upon my departure from the facility and will return the assigned nametag.

Print Volunteer's Name

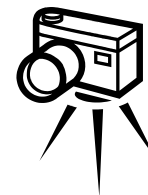
Date

Volunteer's Signature



Photo/Interview Release Form

"It's okay to use my photo and words."



I, _____, grant *The*
(Please print name)

Salvation Army permission to take or use my photograph (still, continuous film, videotape or other mediums) for publication or broadcast.

I consent to be interviewed by any Salvation Army staff member for the general purpose of publication of any statement by me to the above individual.

I release *The Salvation Army*, its agents and employees, from any liability for the use of my image, voice, writings, statements, or opinions by or attributed to me.

Signature

Date

Witness / Staff Signature

Date



THE SALVATION ARMY

LEE & HENDRY COUNTY COMMAND



VOLUNTEER ACKNOWLEDGEMENT

I acknowledge that I have been given a copy (yellow pages) of the following General Orders:

- G.O. 96-09 - Client Grievance Procedure
- G.O. 97-27 - Confidential Information Policy
- G. O. 97-38 - Harassment in the Workplace
- G.O. 97-52 - Code of Ethics

My signature below indicates my agreement to follow all codes and policies set forth during any time in which I volunteer for The Salvation Army.

Print Volunteer Name

Date

Volunteer Signature



The Salvation Army of Lee & Hendry County

Policy Receipt And Acknowledgement: Alcohol and Illegal Drugs

I, _____, acknowledge the receipt of The Salvation Army's policy on Alcohol and Illegal drugs. I understand that it is my responsibility to read and familiarize myself with this information. I understand that it is my responsibility to contact the Volunteer Specialist with any questions I may have regarding the information contained in the policy.

I further understand that the policy and procedures contained in this documentation constitute statements of policy only, and are not to be interpreted as a contract of employment between The Salvation Army and me. I also understand that The Salvation Army reserves the right to change, modify, or delete any of its policies and procedures relating to the Drug-Free Workplace Program at any time.

I understand that any violation of the Drug-Free policy, or any related incident may lead to termination of my assignment. I also understand that, should my work performance be found unsatisfactory or unacceptable, that my assignment with The Salvation Army can be terminated.

Print Name

Signature

Witness signature

Date