



A Safe Place

TRANSFORMING LIVES AFTER DOMESTIC VIOLENCE

Individual Volunteer Application

This form is to be completed by individuals seeking to volunteer at A Safe Place, either indirectly or directly. Completed forms can be returned to the Volunteer Specialist.

NOTE: Completion of the Illinois Certified Domestic Violence 40-hour Training is required for any volunteer position that works directly with clients or client records at A Safe Place.

Name: _____
(First) (Middle) (Last)

Address: _____

Phone: _____
Home Work Cell

Email: _____ Date of Birth: _____

Emergency Contact: _____
Name Relation Phone Number

High School attending/attended: _____

Location: _____ Date Graduated: _____

College attending/attended: _____

Location: _____ Date Graduated: _____

Degree(s) Obtained: _____

Licensure (s) Obtained: _____

Have you ever applied to A Safe Place as a volunteer? _____
Date of last application

1. Have you completed Illinois Certified Domestic Violence 40 Hour Training? (not required for all volunteering opportunities)
 Yes
 No
2. If no, would you be interested in completing 40 hour training? (40 hour training is required for any direct service with clients, children, or clientele files)
 Yes
 No

2710 17TH STREET, SUITE 100 ZION, ILLINOIS 60099

HELP LINE: 847.249.4450 TTY: 847.249.6557

BUSINESS OFFICE: 847.731.7165 FAX: 847.731.7528

E-MAIL: INFO@ASAFEPLACEFORHELP.ORG WWW.ASAFEPLACEFORHELP.ORG

3. How did you hear about A Safe Place?

4. Have you ever had any professional or personal experiences regarding domestic violence? If so, please briefly explain:

5. Current occupation:

6. Employer:

7. Personal or professional skills:

8. **ASP volunteering interests (check all that apply):**

Direct services (requires 40 hour training)

- Oversee children or children's programs
- Group facilitation
- Legal advocacy
- Emergency shelter assistance
- Answering crisis hotline
- Counseling
- Mentoring
- Other

Indirect services (does not require 40 hour training)

- Financial/accounting
- Grant or other research
- Events
- Clerical/Reception
- Outreach design (flyers, brochures)
- Organizing donations
- Cleaning
- Other

9. General Interests (check all that apply, does not require 40 hr training):

- | | |
|---|--|
| <input type="checkbox"/> Reading | <input type="checkbox"/> Public speaking |
| <input type="checkbox"/> Working outdoors | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Arts and culture | <input type="checkbox"/> Sports _____ |
| <input type="checkbox"/> Teaching | <input type="checkbox"/> Heavy lifting |

Volunteer preferences:

10. Is there a particular age group you are most interested in working with?

- Children (Infants Toddlers 2-5 Young children 6-11)
- Teens (12-17)
- Adults

11. Are there groups with which you would *not* be interested in working?

- No Yes _____

12. Program Interest (Check all that apply):

**Note that some jobs in this program will require 40 hour training

- | | |
|---|---|
| <input type="checkbox"/> Emergency Shelter** | <input type="checkbox"/> Community Meeting** |
| <input type="checkbox"/> IPDAV** | <input type="checkbox"/> Children's Program** |
| <input type="checkbox"/> Family Visitation Center (closed on Tuesday)** | <input type="checkbox"/> Zion Campus (Clerical and Donations) |
| <input type="checkbox"/> Crisis Line ** | <input type="checkbox"/> Group Facilitation** |
| <input type="checkbox"/> Legal Advocacy (Hours are 8am- 5pm)** | <input type="checkbox"/> Education and Prevention |
| <input type="checkbox"/> Life Skills** | <input type="checkbox"/> Donation pick up/drop off- transport |

13. Do you have any physical or mental limitations they may limit your ability to perform certain types of work? If yes, explain:

Availability:

14. When are you interested in volunteering?

Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Times							
Times							

Notes: _____

15. Do you have access to transportation?

___ Yes ___ No

16. Have you ever been convicted of a crime? Please list conviction(s) and date(s).

It is A Safe Place policy not to consider an applicant's arrest record in employment and volunteer decisions, but a job-related conviction may be considered. Applicants whose position requires contact with clients or their children are automatically barred from employment or volunteering if convicted of an offense that would, under the law, bar the applicant from employment by a licensed child care facility. Convictions of other offenses will be considered on a case by case basis. Every applicant shall, as part of the application process, enumerate all convictions; certify that falsification of the information is ground to deny or withdraw an employment or volunteer position or immediately terminate the employee or volunteer; and authorize the release of criminal conviction information to us. Should the background check disclose conviction for a crime, the applicant will be given a copy of the information. All background check information shall be treated as confidential and maintained in the volunteer's file located in a private office.

I have attached three letters of reference from co-workers, friends, and/or instructors with phone numbers and addresses for each. Family members excluded.

I have completed the Illinois Department of Child and Family Services background check form to be submitted with this application.

When would you be available for an interview? (Please provide days and times)

ALL APPLICANTS, PLEASE SIGN BELOW

By signing below you are authorizing A Safe Place to run a criminal background check.

Signature

Date

Please send completed application to dcisneroz@asafeplaceforhelp.org