



Volunteer Application

Marland Children's Home (MCH) / Marland's Place will consider volunteer applicants for all positions without regards to their race, sex, age, color, religion, national origin, or disability. Please print legibly.

Date: _____

Full Name (please include middle name, maiden name, and any aliases):

Date of Birth: _____ Social Security Number: _____

Home Phone: _____ Cell Phone: _____

Mailing address (and zip code): _____

Email address: _____

Driver's License: State: _____ Number: _____

(A copy of driver's license and insurance verification is required if transporting youth.)

Do you authorize MCH to obtain a copy of your driving record? Circle *yes* or *no*.

Do you authorize MCH to obtain a criminal background check? Circle *yes* or *no*.

Have you ever been convicted of a felony? Circle *yes* or *no*.

If yes, state the offense, location, date, and disposition: _____

Volunteer Positions of Interest

Please check each position in which you are interested:

☐ **Mentorship** (requires DHS notification, background check, and possibly a home visit)

Residents may be transported, with advance approval

☐ **Administrative Volunteer** (assist with tasks such as mailings, and record-keeping, etc.)

☐ **Special Event Volunteer** (assist occasionally with gift-wrapping, parties, events, etc.)

☐ **Clothes Closet**

☐ **Handyman person / light maintenance**

☐ **Other:**(may include arts, sports, educational groups, transporting. etc.) Please describe:

Education, Interests, Special Skills, and Talents

Please describe education, talents, and special skills you can bring to the volunteer experience:

Have you worked with Foster children or Foster Parents previously? Circle *yes* or *no*.

Please describe your experience: _____

References

Please provide two references (not relatives) who have known you for at least two years.

Name: _____ Address: _____

Telephone: _____ Occupation: _____

Your relationship: _____

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Your relationship: _____

Confidentiality Agreement

Confidentiality is the legal and ethical responsibility of each person who works or volunteers at Marland Children's Home (MCH) / Marland's Place. In order to provide, promote, and respect the privacy of clients and maintain an atmosphere of trust, we require all employees and volunteers to abide by this confidentiality statement. By signing this statement, I pledge not to divulge or release information to persons not properly authorized access to that information. I agree to carry out professional communication of client related matters in such a manner as to ensure the confidentiality of the information being communicated. I also agree to comply with MCH policies. In addition, the objective of student observation is to gain experience. Therefore, I guarantee no billing will occur. I certify that my answers on this application are true and correct as far as I know. I authorize MCH to contact my references and grant permission for background/security checks as may be required.

Volunteer Applicant Signature/Date

Witness Signature/Date