



VOLUNTEER APPLICATION

NAME: _____
Last First Middle Suffix

THE FOLLOWING INFORMATION WILL BE HELD IN STRICT CONFIDENTIALITY

SOCIAL SECURITY NUMBER: _____

MAILING ADDRESS: _____
Street Apt./Unit or PO Box

City State Zip Code

PRIMARY PHONE: (_____) _____ **SECONDARY PHONE:** (_____) _____

E-MAIL ADDRESS: _____

PREFERRED METHOD OF CONTACT: () U.S. MAIL
() TELEPHONE
() E-MAIL
() OTHER: _____

GENDER: () MALE () FEMALE

DATE OF BIRTH: _____
Month Day Year

IDAHO DRIVER'S LICENSE: _____
Number Class Restrictions

BACKGROUND CHECK: An Idaho State Police Bureau of Criminal Identification Background Check is required to volunteer at the Nampa Family Justice Center. The Background Check form is attached to this Volunteer Application. There is a non-refundable fee of \$10.00 required to complete the background check, which we ask that you pay. If you are unable to pay the fee, but would still like to volunteer, please contact the Volunteer Coordinator and arrangements will be made to have the background check completed.

If you agree to complete the ISP background check, please indicate by initialing here: _____

EDUCATION HISTORY

This section must be accurate and complete. The application is used to determine if you meet minimum requirements as outlined in the Nampa Family Justice Center *Volunteer's Operations Manual*.

High School Graduate: () YES () NO GED: () YES () NO

UNIVERSITY/COLLEGE (UNDERGRADUATE, GRADUATE, AND POST GRADUATE)

<hr/> <i>School Name</i>	<hr/> <i>Location</i>	<hr/> <i>Dates of Attendance</i>
<hr/> <i>Degree Awarded</i>	<hr/> <i>Date</i>	<hr/> <i>Major Field of Study</i>

<hr/> <i>School Name</i>	<hr/> <i>Location</i>	<hr/> <i>Dates of Attendance</i>
<hr/> <i>Degree Awarded</i>	<hr/> <i>Date</i>	<hr/> <i>Major Field of Study</i>

<hr/> <i>School Name</i>	<hr/> <i>Location</i>	<hr/> <i>Dates of Attendance</i>
<hr/> <i>Degree Awarded</i>	<hr/> <i>Date</i>	<hr/> <i>Major Field of Study</i>

BUSINESS, TRADE, TECHNICAL, VOCATIONAL SCHOOL OR MILITARY TRAINING

<hr/> <i>School Name</i>	<hr/> <i>Location</i>	<hr/> <i>Dates of Attendance</i>
<hr/> <i>Title of Program/Subjects Taken</i>	<hr/> <i>Date</i>	<hr/> <i>Certificate(s) Received</i>

<hr/> <i>School Name</i>	<hr/> <i>Location</i>	<hr/> <i>Dates of Attendance</i>
<hr/> <i>Title of Program/Subjects Taken</i>	<hr/> <i>Date</i>	<hr/> <i>Certificate(s) Received</i>

EMPLOYMENT HISTORY

List your employment history, starting with the most recent job, including part-time, temporary, and volunteer jobs. If more than one job was held with a given organization, list each job held as a separate period of employment. Under "Duties," describe clearly the tasks you performed and the nature of your supervisory, technical, or other responsibilities as they relate to the job for which you are applying. Be complete and specific in detailing duties.

Employer	Job Title	Dates of Employment
----------	-----------	---------------------

Address (Street, City, State, Zip Code)

Supervisor Name/Title	Phone
-----------------------	-------

Duties: _____

Employer	Job Title	Dates of Employment
----------	-----------	---------------------

Address (Street, City, State, Zip Code)

Supervisor Name/Title	Phone
-----------------------	-------

Duties: _____

VOLUNTEER AVAILABILITY

In short, we require that volunteers for the Nampa Family Justice Center complete a minimum of Domestic Violence Training (DV 101), and ask that volunteers commit to at least 12 months of volunteering. If you are unable to commit to 12 months of volunteering, please indicate what you are able to commit to. Also, volunteers are required to purchase and wear the purple "Volunteer" polo. The polos cost \$25, and are available through the Volunteer Coordinator. If you are unable to pay for the polo, but would still like to volunteer, please contact the Volunteer Coordinator and your needs will be accommodated.

Availability: () Long Term (12 month commitment)
 () Short Term (6 month commitment)
 () Special Projects (fundraisers, training events, community awareness, etc.)

Please specify your availability by checking the boxes for the time periods you are available, and indicating the number of hours you are available per time period.

	Monday		Tuesday		Wednesday		Thursday		Friday		Saturday	
	<input checked="" type="checkbox"/>	# Hours	<input checked="" type="checkbox"/>	# Hours	<input checked="" type="checkbox"/>	# Hours	<input checked="" type="checkbox"/>	# Hours	<input checked="" type="checkbox"/>	# Hours	<input checked="" type="checkbox"/>	# Hours
Morning												
Afternoon												
Evening												

Are there any physical conditions to be taken into consideration in arranging volunteer assignments for you? () YES () NO

If "YES," please explain:

Pre-Interview Information

- | | | |
|---|-----|----|
| 1. Have you used illegal drugs in the last three (3) years? | Yes | No |
| 2. Have you been arrested for any crime in the last 10 years? | Yes | No |
| 3. Have you been involved in any illegal activity that would disqualify you as a volunteer? | Yes | No |
| 4. Are you unable to volunteer a minimum of 16 hours per month? | Yes | No |
| 5. Are you unable to make a 12 month commitment to the NFJC as a volunteer? | Yes | No |

If you answered "Yes" to any of the above, please explain:

CERTIFICATION: I certify that I possess the experience, education, and/or licenses required for the volunteer position for which I am applying. I also certify that all statements, information and documents provided with this application are true, complete and correct to the best of my knowledge and are made in good faith. I understand that omissions, misleading, false, or untrue information, or any attempt at fraud or deceit in any manner connected with this application and subsequent testing may result in my NOT being considered for a position with the Nampa Family Justice Center.

Signature _____

Date _____

ADMINISTRATIVE (FOR INTERNAL NFJC USE)

Application Received: _____

Application Logged: _____

Application Reviewed: () Accepted
 () Rejected
 () Conditionally Accepted

Reason for rejection or conditional acceptance:

Checklist:

- () Application Complete (with signature)
- () Interview (Date: _____)
- () Background Check (Date: _____)
- () Orientation Meeting (Date: _____)
- () Assigned to Training (Date: _____)
- () Graduation (Date: _____)
- () Assigned to First Position (Date: _____)

NOTES: