



**Ionia Montcalm Secure and Friendly Environment  
Child Advocacy Center**  
10260 S Sheridan Rd  
Fenwick, MI 48834  
(616) 225-7267  
www.imsafecac.org

## **VOLUNTEER APPLICATION**

Thank you for your interest in the IM SAFE CAC. We welcome prospective volunteers from diverse backgrounds and experience. We hope you will consider joining us in our work to protect children. Please return the completed application via email to [imsafecac@gmail.com](mailto:imsafecac@gmail.com) or mail to the address listed above.

The questions asked in this application are asked as a preliminary assessment of your interests and talents to determine your potential placement as an IM SAFE CAC volunteer.

### **INFORMATION DISCLOSURE**

**If you have been arrested or convicted of a crime against a child, or if you do not successfully pass the required background clearances, you CANNOT volunteer at the IM SAFE CAC.** A Michigan State Police criminal background check and a Department of Human Services Central Registry Clearance background check will be conducted and are required in order to be accepted in the volunteer program. If you choose to withhold this information, you will be ineligible to volunteer. Upon receipt of a completed volunteer application, signed release form, and signed consent form, IM SAFE CAC will conduct the above mentioned background checks. The IM SAFE CAC Director will review all results.

In instances where negative or incomplete information is obtained, the Director will assess the potential risks and liabilities and determine whether the individual should be accepted for volunteer work. All offers of volunteer work at the IM SAFE CAC are contingent upon clear results of a thorough background check. Background checks will be conducted on all adult volunteers. The IM SAFE CAC reserves the right to modify this policy at any time without notice. Please also note that as a volunteer, you are obligated to report changes in your ability to drive and/or the loss of vehicle insurance coverage.

Please note all of the following requirements for volunteer eligibility:

**18 years of age or older, completed volunteer application, volunteer interview, criminal background check, reference check, agency orientation, and agency provided training.**

## VOLUNTEER JOB DESCRIPTIONS

### **Clerical/Office Volunteer:**

Duties include but are not limited to: making copies, compiling packets, organizing files and literature, preparing bulk mailings, restocking shelves, answering telephones, maintaining office/wish list inventories and general everyday administrative tasks. Volunteers may also welcome families, assist parents with paperwork, tidying waiting room areas and providing guests with general assistance.

### **Direct Care Volunteer:**

Duties include but are not limited to: greeting and informally visiting with children and adults while creating a safe and child friendly environment as families wait for interviews or counseling sessions, supervising/entertaining children and siblings in the waiting area, and tidying the waiting room areas.

**Applicants for Direct Care Volunteer positions MUST complete a specialized training by the IM SAFE CAC prior to placement.** (Please note: if you have worked or volunteered with another child advocacy organization you **MUST** list that organization as a reference).

### **Facility Maintenance Volunteer:**

Duties include but are not limited to: spending time outdoors beautifying the yard in the spring, summer or fall by planting flowers, raking leaves, maintaining flower beds or weeding unwanted vegetation. These volunteers may also participate in interior and/or exterior painting and cleaning projects. These projects can be good opportunities for high school groups, work or church groups who are interested in community involvement.

### **Special Event / Fundraising Volunteer:**

Duties include but are not limited to: pre-event planning and preparations, post-event clean up, participation in various aspects of special events, serving on and attending event committee meetings. This position also includes gathering donations for the event, assembling mailings and telephoning prospective advertisers/sponsors. This volunteer may also participate in the event by helping with registration, greeting guests, collecting tickets or various other activities.

**Events are held at various times throughout the year and volunteers will be called to participate as the need arises.**



Today's Date: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

Full legal name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Telephone: ( ) \_\_\_\_\_ Work Telephone: ( ) \_\_\_\_\_

Cell Phone: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Current place of employment and/or name of school attending:

\_\_\_\_\_

Have you had any previous volunteer experience?

If so, please list the name of the organization(s) and the approximate time frame.

Organization: \_\_\_\_\_ Time frame: \_\_\_\_\_

Organization: \_\_\_\_\_ Time frame: \_\_\_\_\_

List your level of education and special trainings: \_\_\_\_\_

\_\_\_\_\_

When is the best time to reach you? \_\_\_\_\_

How do you prefer we contact you? \_\_\_\_\_

Please indicate morning, afternoon and evening availability.

Monday A.M. \_\_\_\_\_ P.M. \_\_\_\_\_ Evenings \_\_\_\_\_

Tuesday A.M. \_\_\_\_\_ P.M. \_\_\_\_\_ Evenings \_\_\_\_\_

Wednesday A.M. \_\_\_\_\_ P.M. \_\_\_\_\_ Evenings \_\_\_\_\_

Thursday A.M. \_\_\_\_\_ P.M. \_\_\_\_\_ Evenings \_\_\_\_\_

Friday A.M. \_\_\_\_\_ P.M. \_\_\_\_\_ Evenings \_\_\_\_\_

Saturday A.M. \_\_\_\_\_ P.M. \_\_\_\_\_ Evenings \_\_\_\_\_

Some volunteer duties require the use of a car. Do you have an available car covered with liability insurance?

Yes  No

Are you considering volunteering with us for course credit or to fulfill a class requirement?

Yes  No

If yes:

School name: \_\_\_\_\_ Course: \_\_\_\_\_

Instructor's name: \_\_\_\_\_

Have you ever been convicted of a crime?  Yes  No

If yes, please explain: \_\_\_\_\_

Please list additional interests, knowledge areas, hobbies or special skills that you offer as a volunteer.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please indicate the areas of service that interest you.

Clerical/Office Volunteer  Direct Care  Volunteer Fundraising  Grounds Maintenance

Other \_\_\_\_\_

Were you ever a victim of sexual assault or Severe Physical Abuse?  Yes  No

Any additional thoughts, comments, or anything else you would like us to know?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list three personal or professional references that we can call.

	Name	Phone Number	Relationship
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____



## CRIMINAL BACKGROUND CHECK FORM

### Permission to Conduct Background Checks

I hereby give my permission for the IM SAFE CAC to conduct a criminal background check to obtain information for the purpose of assessing my suitability as an IM SAFE CAC volunteer.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

=====

### For Completion by IM SAFE CAC

Date of background checks: \_\_\_\_\_

Initials: \_\_\_\_\_

MI Public Sex Offender Registry (ICHAT) \_\_\_\_\_

No results found

US Public Sex Offender Registry \_\_\_\_\_

No results found

Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_