



Community Development ♥ Special Needs Housing ♥ Nutrition ♥ Recreation ♥ Mentoring and Advocacy

Volunteer Intake Form

(Please Print – Please Print)

First Name:	_____	Last Name:	_____
Address:	_____	City/State/Zip:	_____
DOB:	_____	Age:	_____
Ethnicity:	_____	Occupation:	_____
Phone:	_____	Marital Status:	_____
		Email:	_____

Children: ONLY list children that will volunteer and I will supervise, be fully responsible for my child /ren at all time.

<i>First Name</i>	<i>Last Name</i>	<i>DOB</i>	<i>Age:</i>	<i>Sex</i>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

General information (Please Check off and fill in blanks)

I would like to volunteer because: _____

My volunteer experience is (List where & when) _____

Have you ever been employed by JPC? No Yes (When & Function) _____

Have you previously volunteered at JPC? No Yes (When & Function) _____

Have you ever utilized the JPC services? No Yes (When & Services) _____

Have you ever been convicted of a crime? No Yes (When & Conviction) _____

Are you on any Community supervision No Yes (Type & Finishing date) _____

Comments: _____

<i>Name</i>	<i>Agency</i>	<i>Telephone</i>	<i>Stipulations</i>
_____	_____	_____	_____

We will contact the Community Supervisor to verify that volunteering at JPC is acceptable and will benefit all parties involved. Release must be signed

IMPORTANT: All volunteer applications are screened. Please list two references (not related to you)

<i>Name</i>	<i>Relationship</i>	<i>Telephone</i>	<i>Known since</i>
1) _____	_____	_____	_____
2) _____	_____	_____	_____

Rev. Maria A. Scates
Chief Executive Officer

Rev. Ursula Meier
Chief Operations Officer

Mr. Robert A. Polivka
Board President



Volunteer Opportunities (Please Check off and fill in blanks)

Administrative - Clerical Tasks

- General Clerical
- Experience Office Work
- Data entry
- Writing Proofreading

Experienced Computer knowledge

- Web Site upkeep
- PowerPoint Publisher
- Photo/media editing
- Experience in _____

Event (General Tasks)

- Making phone calls to invite
- Putting up Posters (Need Bike / Car)
- Setting up / pulling down
- Security Hospitality Food Server
- Photographer First Aide
- Other: _____

Facilities upkeep

- General cleaning
- Lawn care Tree cutting / pruning
- Carpentry Painting
- Experience in _____

Food / Nutrition

- Serving Meals
- Food Pantry
- Community Garden
- Baking

Special Events (ask for yearly Event sheet)

- June, Say No To Drugs Party
- July, Week of Celebration
- July, Peace March
- Aug, Back to School & Say No to Drugs Party
- Christmas Celebrations – Children
- Christmas Celebration – Families

Working with

- Children at YC (Tue-Thu)
- Adults
- Mother with children
- Teach a life skill class

Tell us

how you would like to help us with

Availability

(List days and times that you available)

Day	From:	To:
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

IMPORTANT: Please read and sign below.

The Johnson Park Center (JPC) serves a variety of different people in our community. We strive to protect their privacy as well as their safety as well as the safety of our volunteers. Therefore, JPC reserves the right to limit, restrict and/or deny the use of volunteers on its properties and programs based on the following: (1) Criminal history, including sexual offenses; (2) drug possession or sales, (3) refusal to submit to background check and/or drug/alcohol screening if required or asked for.

Confidentiality Agreement:

JCTOD Outreach, Inc. dba Johnson Park Center (JPC) is a faith-based non-profit organization that promotes positive change, revitalization, and community development in the heart of Cornhill, the poorest neighborhood in the City of Utica, NY. Those staying or receiving services at JPC are going through a difficult time in their lives. It is important that they concentrate on their recovery and not be distracted by outside relationships or situations.

Therefore, volunteers agree that they will not:

- 1) Give, loan or borrow money or property (gifts, cigarettes, donations) to clients or receive or accept same from them.
- 2) Invite clients to their home or other activities that the volunteer is part of no matter how good or educational the activity is which includes but is not limited to Support Groups, Church, Social gatherings, etc. The volunteer will not give the clients a ride in their car.
- 3) Develop a relationship with a client that would lead to exchanging phone numbers or addresses. Personal friendships that were NOT pre-existing are to be avoided.
- 4) Buy merchandise or services from a client or sell to a client.
- 5) Involve themselves in the affairs of the client's family or personal problem and will not counsel or advise clients in any matters. The volunteer will not discuss politics, religion or other ideological/ethical topics but rather find neutral and encouraging topics to discuss.
- 6) As a volunteer I will only do tasks that are conducive for my physical health and all my special medical needs are made know to JPC in writing, by means of this document. Medical Limitations: _____
- 7) Further, as a volunteer at JPC I understand that I must hold all information regarding clients – tenants in strict confidence. I will not divulge any information about clients – residents, including the fact that they were receiving services, or staying here, to anyone without JPC consent.

Media Release: I hereby authorize JPC and its legal representatives and assigns to use, reproduce, and/or publish all written, audio, and/or visual materials, including photographs that may pertain to me in any manner deemed appropriate in order to promote/publicize programs and services. All materials remain the sole property of JPC and I hereby release JPC and its legal representatives and assigns of from all claims and liability related to all Media materials. This authorization is continuous and may only be withdrawn by my specific rescission of this authorization.

Finally, by signing this form I understand that participation at JPC is on a volunteer basis and I will not hold JPC liable should any injury occur while on any JPC Properties and **comply completely with all the guidelines as outlined above.**

I have read the above and agree. I am over 18 years of age

Signature

Date:

Signature of Parent / Guardian: If under 18 years of age