

OPEN ARMS, INCORPORATED VOLUNTEER APPLICATION

When turning in this application please provide driver's license and auto insurance card for us to make a copy. We need these items for your volunteer file.

Thank you for applying with us and we look forward to working with you as a volunteer.

Open Arms, Inc.

Fonda Strong
Executive Director

Rosalynn Fowler
Associate Executive Director

Application Date: _____

Personal Information:

Name _____

Address _____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

Place of Employment _____ Phone _____

Date of Birth _____ Do you have reliable transportation? _____

In case of an emergency, whom should we notify?

Name _____ Relationship _____

Address _____ Phone _____

Education:

Highest Level of education obtained _____

Do you currently hold a professional license in the State of Georgia? _____ If yes,
please state which profession _____

List special skills/talents/or fluent in another language:

Questionnaire:

Do you have any problems that might limit your ability to fulfill certain volunteer assignments?
If yes, please explain _____

Have you ever been convicted of any crime other than minor traffic violations? If yes, please
explain _____

In what capacity do you feel you would be most effective at Open Arms, Inc. and what do you
hope to gain by volunteering? _____

Open Arms Inc.

Volunteer Hold-Harmless Agreement

I fully understand and agree to assume all risks involved in any and all duties that I perform in a volunteer capacity on behalf of or in connection with Open Arms Incorporated (Inc.). I agree to hold Open Arms harmless for any injury(s), loss or damages which I might sustain during the course of my volunteer duties.

This waiver does include myself, all of my family members and descendants forever from seeking any legal action whatsoever against Open Arms Inc., or its successor organizations or any representatives thereof.

Signature of Volunteer Printed Name Date Signed

If a minor, Signature of Parent Printed Name Date Signed
Or Legal Guardian

Instructions:

This agreement must be signed by ALL volunteers before performing any services relating to activities of Open Arms. This includes, but is not limited to, services providers, contact persons, foster caretakers, transport volunteers, and fund raising volunteers.

Please print and sign the agreement and send it by mail or FAX or deliver in person to the Director of Open Arms Inc., or authorized representative.

Thank you,

Director
Open Arms Inc.

Confidentiality Statement

I, _____, as a volunteer for Open Arms, Inc. understand that I may not reveal confidential information learned or obtained while volunteering for Open information to anyone other than authorized persons may result in legal action.

Volunteer Signature

Date

Reading and Comprehension

I have read and understood the Open Arms, Inc. Volunteer Handbook and Volunteer Policies and Procedures Manual. Any questions that I had were answered satisfactorily. I understand that as a Volunteer, I am expected to act in accordance with these documents and will be terminated if I fail to do so.

Volunteer Signature

Date

Volunteer Coordinator Signature

Date

References:

Please list 3 people who are not related to you to serve as personal references. Please include a complete address if you are able.

1. Name _____ Relationship _____
Address _____
Phone _____

2. Name _____ Relationship _____
Address _____
Phone _____

3. Name _____ Relationship _____
Address _____
Phone _____

Please Note: All information disclosed on this application is confidential.

OPEN ARMS, INC.
VOLUNTEER JOB DESCRIPTION

PURPOSE:

To provide support to the staff and residents of Open Arms, Inc.

DUTIES

1. The prospective volunteer will have a personal interview with the Volunteer Coordinator and then will meet with Shelter Directors to discuss volunteer's job and time schedule for the Shelter.
2. On-the-job training will be provided for each volunteer. A mandatory orientation is required and provided.
3. Volunteers should sign in upon arriving at the Shelters and upon leaving.
4. Time sheets will be filled out and turned in bi-weekly to the Volunteer Coordinator.
5. If it is necessary to be absent or late on your scheduled day, notify the Shelter as far in advance as possible so the children will not be disappointed and other arrangements can be made.
6. Complete confidentiality must be maintained on all names, cases and information obtained, observed, heard at that Shelters.
7. Do not give advice or otherwise instruct a resident to do, say or how to act, without the permission and guidance of a staff member.
8. Do not give out personal information about yourself or other volunteers.
9. Do not lend money or other material items to the residents.
10. You may be asked to participate in fundraising activities.
11. Respect the privacy of the residents of the Bridge by not asking probing questions about why they are at the Bridge, their families, etc.
12. If you have any questions, please do not hesitate to call or contact the Volunteer Coordinator during the hours of 8 AM - 5 PM Monday through Friday at the Administrative Offices (229) 431-1121.

Volunteer Signature

Date

Volunteer Coordinator Signature

Date

RULES FOR OPEN ARMS, INC. VOLUNTEERS

1. You will always have an experienced staff member to assist you. Please do not hesitate to ask for help.
2. Records will be kept on your hours and activities. You will need to sign in at the Shelter. You are responsible to turn in a time sheet to the Volunteer Coordinator on a bi-weekly basis (this is the same time that staff turn in their work time sheets). You may fax these from the home if you are unable to come by the office.
3. You must wear your I.D. Badge at all times at the Shelters.
4. If problems arise, either with a resident or your own schedule, please notify the Program Director of the Shelter to make other arrangements. Remember, we want to work with you any way we can.
5. All volunteers are expected to keep appointments made with the children. If because of illness, or other problems you are unavailable to keep your scheduled time at the Shelter, please notify staff as soon as possible. Remember that the children are learning to trust again.
6. As a volunteer you are a representative of Open Arms, Inc. You are expected to be a good behavior model for the children through your choice of works, words, dress and actions.
7. Matching a volunteer to a type of work which is satisfying to him/her and meets the needs of Open Arms is our goal and responsibility. The job you are asked to do will probably be challenging, demanding, frustrating, as well as enjoyable and satisfying. Part of our obligation to you as a volunteer is to listen to your frustrations, joys and successes. Please feel free to talk with staff, the Shelter Directors or the Volunteer Coordinator at any time.
8. Volunteers must know the shelter/agency policies and procedures and rules. Volunteers must be willing to assist the staff in enforcing these rules.
9. Volunteers must be willing to abide by all agency policies relating to the security and confidentiality of information.
10. Again, your input, observations, and opinions are very important to us. Please communicate with the staff and report any progress or important changes in the child's situation.

Signature

Date

Volunteer Interview Form

Interviewer: _____ Date: _____

Name of Volunteer: _____ Date: _____

I. Questions

1. What attracted you to our agency? Is there any aspect of our work that most motivates you to seek to volunteer here?

2. Why did you decide to become a volunteer?

3. What do you think is the most important thing we should be doing to help our clients and to fulfill our mission in the community?

4. What skills do you think you have that would contribute to our organization?

5. What are some of the things that you like doing? What type of hobbies do you have?

6. Is there a type of client you would prefer working with? Or is there a type of client that you would not feel comfortable working with?

7. What can I tell you about our agency? Or may I answerer any questions you have so far?

II. Match with Volunteer Positions

Discuss potential volunteer positions and check match of interests, qualifications and availability.

1. _____

2. _____

3. _____

III. Interviewer Assessment

Appearance:

Poised, neat Acceptable Unkempt

Reactions to questions:

Helpful, interested, gave information Answers questions Evasive
 Confused

Disposition:

Outgoing, pleasant, confident Reserved Withdrawn
 Suspicious, antagonistic

Physical Restrictions:

IV. Recommended Action

Consider for following positions:

1. _____

2. _____

Not suitable for this agency at this time
