



BETHLEHEM CENTER

1638 North Dinuba Blvd.
Visalia, CA 93291
(559) 734-1572
FAX: (559) 734-4921

VOLUNTEER SERVICE APPLICATION

NAME: _____

HOME ADDRESS: _____

Address

City, State, Zip

TELEPHONE: Home: _____ Cell: _____

EMAIL ADDRESS: _____ MESSAGE PHONE: _____

DATE OF BIRTH: _____ DESIRED POSTION: _____

DATE AVAILABLE: _____ HOURS AND DAYS AVAILABLE: _____

REFERRED BY: _____

Why would you like to volunteer? _____

Have you volunteered anywhere before? Yes _____ No _____

If yes, when and where? _____

Have you ever been convicted of a crime, other than minor traffic violations? Yes _____ No _____

If yes, describe and state when the conviction occurred. (A conviction may be relevant if volunteer job related, but will not necessarily disqualify you). _____

Languages you speak/read/write, other than English: _____

In an emergency, person to contact: _____ Phone No. _____

Positions/tasks you are interested, are willing to perform, or have previous experience.

Check all that apply:

Kitchen/Dining Room:

- Food Service
- Dishwasher
- Clean-up
- Greeter
- Client Counter

Thrift Store:

- Cashier
- Store Support

Warehouse:

- Sorter
- Pricing
- Bagging/issue food items
- Driver (must have "clean" driving record)

Office/Administration:

- Client intake
- Data Entry
- Filing
- Newsletter Editor
- Volunteer Coordinator
- Grant writing
- Computer technology
- Records-keeping

Buildings and Grounds:

- Landscape maintenance
- Gardening
- Sprinkler system maintenance
- Equipment maintenance
- Shop organization
- Electrical
- Plumbing
- Painting
- Carpentry/woodworking
- Custodial service
- Sign design and preparation

PLEASE READ CAREFULLY:

I am volunteering my time and services without any present or future expectation of payment of any kind. I am under no obligation as to time, duties or resources other than what I freely choose to provide. I understand that my volunteer work is "at will" and that it may be terminated at any time either by me or Bethlehem Center. I agree to conform to the volunteer policies of Bethlehem Center, and the completion of this application does not guarantee my acceptance as a volunteer. I hereby affirm that my answers to these statements and questions are true and correct to the best of my knowledge.

Signed: _____ Date: _____

Bethlehem Center

A mission of the Catholic Church of Visalia

CONFIDENTIALITY AGREEMENT

Pursuant to the Welfare and Institutions Code, Sections 5328-5330,

I, _____, agree not to divulge any information obtained in the course of my service at Bethlehem Center, or otherwise make public, information regarding person(s) who may receive or have received services such that the person(s) who receives services is identifiable. I will not ask them the reason they have come to Bethlehem Center. As a volunteer at Bethlehem Center, I am a mandated reporter of abuse. Information shared with me about abuse cannot go unreported. I will share this information with my supervisor who will assist me with the reporting process.

I recognize that unauthorized release of confidential information may make me subject to a civil action under provisions of Section 5328 of the Welfare and Institutions Code. I have reviewed this confidentiality policy, understand it, and agree to conform my service responsibilities in compliance with it.

Signature

Date

Bethlehem Center

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1638 N. Dinuba Blvd., Visalia, CA 93291

Liability Release

I, the undersigned volunteer, understand that I am not an employee, agent, subcontractor, or independent contractor of Bethlehem Center. I understand that Bethlehem Center will not provide me with compensation, insurance, worker's compensation, or any other benefits of an employee.

In consideration of my being allowed to work as a volunteer for any purpose, I, the undersigned, agree to forever discharge and agree to indemnify and hold harmless Bethlehem Center, the Catholic Church of Visalia and the Diocese of Fresno, its directors, employees, interns, agents and subcontractors against all damages, losses, claims, demands, costs, and expenses (including without limitations, attorney's fees and court costs), and liabilities of any nature whatsoever which may be incurred by me or which may arise from my activities as a volunteer.

Please check the type of organization you represent:

- Church volunteer
- Community service volunteer
- Program volunteer
- Regular volunteer

Volunteer Name (please print): _____

Volunteer Signature: _____ **Date:** _____

PLEASE FILL OUT THE DAYS AND TIME THAT YOU ARE AVAILABLE

| VOLUNTEER AVAILABILITY | | | | | | | |
|-------------------------------|---------------|---------------|----------------|------------------|-----------------|---------------|-----------------|
| TIME | SUNDAY | MONDAY | TUESDAY | WEDNESDAY | THURSDAY | FRIDAY | SATURDAY |
| 6-7 AM | | | | | | | |
| 7-8 AM | | | | | | | |
| 8-9 AM | | | | | | | |
| 9-10 AM | | | | | | | |
| 10-11 AM | | | | | | | |
| 11-12 Noon | | | | | | | |
| 12-1 PM | | | | | | | |
| 1-2 PM | | | | | | | |
| 2-3 PM | | | | | | | |
| 3-4 PM | | | | | | | |
| 4-5 PM | | | | | | | |