



# VOLUNTEER APPLICATION

Please check one:  Volunteer  Student Community Service  Intern  State/JDD Court-Ordered Community Service

### Volunteer Profile

Mr.  Mrs.  Ms. Are you age 21 or older?  Yes  No (Under 14 must be accompanied by an adult)

First Name (If group, please identify group leader's name here)

Last Name

### Permanent Address

Street/PO Box

City

State

Zip

### Seasonal Address

Street/PO Box

City

State

Zip

If seasonal, indicate months in Florida & available to volunteer: From: \_\_\_\_\_ To: \_\_\_\_\_

### Contact Information

Home Phone

Cell Phone

Email Address

### VOLUNTEER OPPORTUNITIES:

(Please check all categories in which you would like to volunteer)

#### YEAR-ROUND OPPORTUNITIES

- |                  |  |   |   |
|------------------|--|---|---|
| Administration:  | <input type="checkbox"/> Answer Phones   | <input type="checkbox"/> Clerical/Filing    | <input type="checkbox"/> Data Entry*  |
| Family Store:    | <input type="checkbox"/> Sort Cloths*    | <input type="checkbox"/> Stock Merchandise* | <input type="checkbox"/> Price Merchandise* <input type="checkbox"/> Cashier*                     |
| Food Pantry:     | <input type="checkbox"/> Sort/Stock Food | <input type="checkbox"/> Bag Groceries      | <input type="checkbox"/> Client Intake  |
| Feeding Program: | <input type="checkbox"/> Cook            | <input type="checkbox"/> Server             | <input type="checkbox"/> Runner (Deliver food to client) <input type="checkbox"/> Canteen Driver* |
|                  |  | <input type="checkbox"/> Cleaning           | <input type="checkbox"/> Feeding Program Coordinator*   |
| Maintenance:     | <input type="checkbox"/> Landscaping     | <input type="checkbox"/> Janitorial         | <input type="checkbox"/> Facility Maintenance <input type="checkbox"/> Equipment Repair           |

#### YEAR-ROUND TRAINING OPPORTUNITIES

- |               |   |  |                                   |
|---------------|---|--|-----------------------------------|
| Professional: | <input type="checkbox"/> Tutoring       | <input type="checkbox"/> Training/Workshop | Type: _____                       |
| Computer      | <input type="checkbox"/> Basic Computer | <input type="checkbox"/> MS Word           | <input type="checkbox"/> MS Excel |
| Training:     | <input type="checkbox"/> Publisher      | <input type="checkbox"/> Power Point       | <input type="checkbox"/> Access   |

#### DISASTER SERVICES

- |            |   |   |   |
|------------|---|---|---|
| Pre-Event  | <input type="checkbox"/> Answer Phones    | <input type="checkbox"/> Clerical           | <input type="checkbox"/> Training <input type="checkbox"/> Preparing for Deployment |
| Post-Event | <input type="checkbox"/> Food Preparation | <input type="checkbox"/> Hospitality Center | <input type="checkbox"/> Stock Food   |
|            | <input type="checkbox"/> Serve Meals      | <input type="checkbox"/> Sort Donations     | <input type="checkbox"/> Canteen Worker   |
|            | <input type="checkbox"/> Procurement      | <input type="checkbox"/> Warehouse          | <input type="checkbox"/> Cleaning   |

#### CHRISTMAS PROGRAMS

- |           |   |  |   |
|-----------|---|--|---|
| Kettle    | <input type="checkbox"/> Bell Ringer (Individual) | <input type="checkbox"/> Bell Ringer (Group) | How many in group? _____  |
| Campaign: | <input type="checkbox"/> Kettle Coordinator*      | <input type="checkbox"/> Kettle Sponsor      | <input type="checkbox"/> Kettle Driver*   |
|           | <input type="checkbox"/> Kettle Counter*          | <input type="checkbox"/> Kettle Musician     | <input type="checkbox"/> Individual <input type="checkbox"/> Group # in group _____ |

I can volunteer unlimited hours to assist with the Christmas Kettle Campaign.  Yes  No



- Christmas Registration & Toyland Distribution:  Registration  Applications  Translator:  Spanish  Creole  Data Entry\*  Clerical/Mailing  Toyland Set-Up  Toyland Clean-Up  Toy Sorting  Toyland Worker  Stock Tables  Curb Service  Parking/Traffic Control

- Holidays  Serve Thanksgiving meal  Adopt-A-Family  Stocking Sponsor # of stocking needed: \_\_\_\_\_  Angel Tree Sponsor # of angels needed: \_\_\_\_\_ Sponsor Christmas Party for program participants:  Yes  No

Day(s) & Time Preferences (Check all that apply)

- Monday  Tuesday  Wednesday  Thursday  Friday  Saturday  Sunday  Morning  Afternoon  Evening

**\*Must pass applicable background checks.**

Do you have any commitments to another company that might affect your volunteer work with us, including confidentiality, non-disclosure or non-competition agreements?  YES  NO

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

**SKILLS AND QUALIFICATIONS**

Summarize any special training, skills, licenses, certificates and/or characteristics of yourself that might qualify you as being able to perform job-related functions for the position for which you are applying:



**GENERAL INFORMATION**

Are you below the age of 18:  YES  NO

Driver's License State of Issue: \_\_\_\_\_

Have you ever been convicted of a **felony**  YES  NO

Within the last two years, have you been convicted of a **misdemeanor that resulted in imprisonment?**  YES  NO

If yes to **either**, please explain: \_\_\_\_\_

(Note: A conviction will not necessarily disqualify you from the job requested)

Have you previously applied for employment here?  YES  NO

If yes, when? \_\_\_\_\_

Have you previously been employed by The Salvation Army?  YES  NO

If yes, where? \_\_\_\_\_



**REFERENCES**

List the names and telephone numbers of four references **not** related to you.

Name	Telephone	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please include any other information you think would be helpful to us. This information could include additional work experience, articles published, accomplishments, etc.

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

**Community Service/Intern Information**

If intern or Community Service, # of hours needed: \_\_\_\_\_

If intern, specify field of study or department you would like to volunteer in: \_\_\_\_\_

**THANK YOU FOR VOLUNTEERING YOUR TIME AND TALENTS TO HELP OTHERS**

**Acknowledgement**

*I certify that the information contained in this application is true and complete. I authorize investigation of all statements contained in this application and understand that any false or misleading statements or material omissions are cause for my inability to volunteer on behalf of The Salvation Army. I hereby authorize former and present employers/volunteer organizations, except as I have otherwise indicated on this application, as well as physician, references and other sources to provide or verify any information that they may have regarding me, my employment and/or volunteer service with them to The Salvation Army and release them from any liability arising from the furnishing of any employment/volunteer information.*

*I understand that The Salvation Army is a religious and charitable organization and requires the assistance of volunteer in carrying out its various spiritual and social programs. As a volunteer, I agree to perform all assignments with the highest level of professional and ethical conduct and confidentiality. I understand that I will not be compensated for services performed as a volunteer. Should I volunteer in any area requiring a background check I agree to complete the applicable forms; and I understand I cannot begin volunteering in that area until all background checks are approved by The Salvation Army.*

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Head Signature

\_\_\_\_\_  
Date



FOR PERSONNEL USE ONLY Physical description of person in photo _____ _____ _____
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**AUTHORIZATION OF  
PHOTOGRAPHY/FILM/AUDIO/TEXT  
AND RELEASE OF LIABILITY**

I hereby irrevocably grant to **The Salvation Army**, its successors and assigns, its agents and those by whom it is commissioned, the absolute, unrestricted and unlimited license, right, permission, and consent to use and reuse, disseminate, copyright, print, reproduce, publish and republish, for any and all trade purposes or commercial or other advertising or public purposes, and in any and all advertising, publicity, display, publication or media, my name, signature and likeness, any portraits, pictures, video, film, photographic prints or other representations of me, or in which I may appear, or any reproductions or sketches thereof or parts thereof, photographic or otherwise, with such additions, deletions, alterations or changes therein as The Salvation Army in its discretion may make, either separately or together with my name or a fictitious name, or the name of another person, with or without any statements or testimonials made by me or authorized by me which The Salvation Army may, in its discretion, prepare for use in connection therewith. I also hereby grant unrestricted use of audio tracks or text containing my voice, comments, or any sounds I may make whatsoever, to The Salvation Army for such purposes as it may deem appropriate. I warrant that I have not limited or restricted the use of my name, voice or photograph to the use of any organization or person.

I hereby release and discharge The Salvation Army, its successors, assigns and agents from any and all claims and demands arising out of or in connection with the use of any of the foregoing, including any claims for defamation, invasion of privacy or violation of any statutory right.

Witnessed by my hand as noted this day.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

Authorization Relating to a Minor (If under 18 years of age)

I hereby certify that I am the parent or legal guardian of this minor child or dependent and have executed this release on his or her behalf.

\_\_\_\_\_  
Signature of Parent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Printed Name

\_\_\_\_\_  
Child's Name



DOING  
THE MOST  
GOOD

**THE SALVATION ARMY  
FLORIDA DIVISION  
CONFIDENTIALITY AGREEMENT**

I, \_\_\_\_\_, am a volunteer of The Salvation Army in the Florida Division. As such I am subject to the Confidentiality policy stated below:

*A great deal of what goes on at The Salvation Army involves personal and confidential matters. All **such material must be treated with strict confidentiality. Volunteers are not to discuss any confidential** Salvation Army business with others, either inside or outside of the facility.*

*As a condition to volunteer, Salvation Army volunteer will not, except as required in the conduct of Salvation Army business or as authorized in writing by a representative of Salvation Army management, publish or disclose, either during volunteering or any time thereafter, confidential information relating to Salvation Army business that they may in any way acquire in the course of volunteering with The Salvation Army.*

*To further protect the interest of The Salvation Army, volunteers must secure permission from management before making a public presentation as a representative of The Salvational Army. Contact the Human Resources Department, where further referral will be given.*

I understand that a breach of this agreement shall constitute grounds for and may result in termination of my volunteer status with this organization.

By signing below, I acknowledge I have read and understand this Confidentiality Agreement and/or have been given the opportunity to ask questions to clarify any issues I do not understand.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

04/2024

## CIVIL RIGHTS TRAINING FOR PARTNER AGENCY VOLUNTEERS

- \_\_\_\_\_ Goals of civil rights is to ensure fairness, equal treatment, equitable food distribution guidelines are followed. Treat all people with dignity and respect.
- \_\_\_\_\_ Discrimination is prohibited on the bases of color, race, age, national origin, disability and sex.
- \_\_\_\_\_ Civil rights apply any time there is any federal assistance. Federal assistance is receiving anything of value from the federal government – not just cash. It can include commodities, training, equipment, and other goods and services.
- \_\_\_\_\_ Special circumstances
  - \_\_\_\_\_ Ensure people with disabilities are accommodated. Sites must be accessible to people with all types of disabilities (e.g. mobility, sight, hearing, other) or alternate means of service delivery should be advertised and provided.
  - \_\_\_\_\_ Provide other language assistance to persons with limited English proficiency who could not gain meaningful access to the program without other language assistance. Assistance must always be provided to LEP households, but the level or type of assistance can vary based on circumstances.
- \_\_\_\_\_ Display the USDA “And Justice for All...” non-discrimination poster in a place where it can be seen by all who visit the premises.
- \_\_\_\_\_ Include the USDA non-discrimination statement on all materials that mention USDA funded programs and ensure the statement is also on web sites that mention USDA funded programs.
- \_\_\_\_\_ Conduct outreach to ensure that potentially eligible persons and households are aware of the program and have information on how to apply.
- \_\_\_\_\_ Maintain confidentiality. It is not appropriate to talk about who is receiving benefits and to make remarks about them. Never share information with others regardless of an expression of good intentions. Refer all requests for information to managers. What happens at the site stays at the site. The exception, of course, is any illegal or inappropriate behavior that should be reported to state or federal officials.
- \_\_\_\_\_ Advise people who allege discrimination about how to file a complaint. You can give them Form H1 or they may write to: USDA, U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call (866) 632-9992 or (202) 720-6382 (TTY). They can fax it to (202) 690-7442.

Date Signed: \_\_\_\_\_

Agency Name:

Agency Number:

Volunteer Name:

Volunteer Signature: \_\_\_\_\_

Agency Representative Name: David Jenett

Agency Representative Signature: \_\_\_\_\_



## Temporary Volunteers Code of Conduct



A temporary volunteer within The Salvation Army includes any person who volunteers only one time, or for one event, in a six-month period. If the volunteer wishes to serve more than once in that time period, they must follow the screening steps laid out by Safe From Harm and Human Resources.

- Volunteers will portray a positive role model by maintaining an attitude of loyalty, patience, courtesy, tact, and maturity.
- Volunteers will act in a caring, honest, respectful, and responsible manner.
- Volunteers will respond to participants with respect and consideration and treat all participants equally, regardless of gender, sexual orientation, race, religion, culture, economic level of the family, or disability.
- Volunteers will respect participant's rights and will help to maintain a safe and nurturing environment.
- At no time during a program, event, or ministry may a volunteer be alone with a minor. They should always be in the presence of at least two official Salvation Army Safe From Harm trained adults.
- Profanity, inappropriate jokes, gossip, sharing intimate details of one's personal life, and any kind of harassment in the presence of participants, volunteers, or staff is prohibited.
- Volunteers should not take photos or videos of any minors in Salvation Army programs, events, and ministries, nor post such photos or videos on the internet/social media.
- Volunteers should not contact minors in Salvation Army programs, events, and ministries via electronic communication or the internet for any reason.
- Volunteers will discuss concerns and complaints in an appropriate manner with Salvation Army leadership.
- Volunteers are to report to Salvation Army leadership any volunteer who violates policies listed in this Code of Conduct.

### Volunteer Rights & Responsibilities

As a volunteer, you have the right to:

- Do meaningful and satisfying work.
- Be recognized as a valued team member.
- Have choices and feel comfortable about saying "no."
- Volunteer in a safe and healthy environment.
- Receive feedback and recognition for your contribution.
- Have your personal information kept confidential.

As a volunteer, you are expected to:

- Be reliable, punctual, and trustworthy.
- Be a positive reflection on those you come in contact while you volunteer with The Salvation Army.
- Ask for support when it is needed.
- Stay safe.
- Be accountable and accept feedback.
- Discuss complaints in an appropriate manner with Salvation Army leadership.

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Print Name

Signature

Date



**CONFIDENTIAL**

**THE SALVATION ARMY  
STATEMENT OF VOLUNTEERS  
(SALVATIONISTS AND NON-SALVATIONISTS)  
FOR WORK WITH CHILDREN\***

This statement will be completed by all applicants for volunteer work for any position involving the supervision or custody of children (under 18 years of age) or for any position in which the applicant is in any way involved with children. The completion of the statement will help to assure The Salvation Army that it will provide a safe and secure environment to those children who participate in its programs and who use its facilities.

I do hereby represent to The Salvation Army, with the understanding that The Salvation Army will rely upon the information provided in considering my application for work with children, that the following statements are true:

1. I understand the essential duties of my position in connection with the working with children in the programs of The Salvation Army. I have reported to my supervisor any accommodation I need to perform these essential job duties.
2. I have never been accused of abuse or neglect of any child or of actual or attempted sexual molestation solicitation or trafficking of any child.

If the foregoing statement is not true, please describe the circumstances of the accusation and the outcome:

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

3. I have never been arrested as a result of a charge of child abuse or neglect, or of actual or attempted sexual molestation, solicitation, or trafficking of any child.
4. I have never been convicted of child abuse, neglect or a crime involving actual or attempted sexual molestation, solicitation, or trafficking of any child.
5. I have provided The Salvation Army with a full list of the organizations for which I have worked (in a paid or voluntary capacity) in positions involving children. I authorize such organizations to provide to The Salvation Army any information they may have regarding my character and fitness for work with children. I release all organizations and individuals from any liability that may result from their furnishing such information to The Salvation Army.
6. I acknowledge that The Salvation Army is a branch of the Christian Church and I agree that I will conduct myself in my work with children in a way that is consistent with the religious and charitable policies and principles of The Salvation Army.
7. Having provided the foregoing information and having affirmed the foregoing statements are true, I recognize that any false information or statements are punishable under applicable laws.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Name – PLEASE PRINT

\_\_\_\_\_  
David Jenett

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Witness Name – PLEASE PRINT

1907 NW 38th St. Miami FL 33142

\_\_\_\_\_  
Address City State Zip

\* For purposes of this Statement, the words “child” and “children” mean individuals below the age of 18 years.



**(The remaining sections are to be completed by a designated member of the Divisional/Command Human Resources or Volunteer Coordinator Departments)**

- 1. All references have been contacted and
  - There were no reports of misconduct involving children; or
  - Misconduct involving children was reported – individual is not approved for work with children and name has been reported to headquarters for inclusion in the Territorial Registry

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Title

- 2. Applicant’s name has been checked in the Territorial Registry and
  - The individual’s name did not appear in the Territorial Registry; or
  - The individual’s name appeared in the Territorial Registry – applicant is not approved for work with children.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Title

- 3. Applicant’s name has been checked in available State databases and
  - There were no reports of misconduct involving children; or
  - Misconduct involving children was reported – applicant is not approved for work with children and name has been reported to the Secretary for Personnel for inclusion in the Territorial Registry.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Title

- 4. \* Prior accusations of abuse have been investigated and
  - There was no reasonable suspicion of abuse; or
  - There was reasonable suspicion of abuse – individual is not approved for work with children and name has been reported to headquarters for inclusion in the Territorial Registry.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Title

\*To be completed only if applicant reports an accusation in response to item # 2 of Statement.