

Volunteer Application 2016-2017

Please complete the attached adult volunteer application (for ages 18+) and either hand deliver, mail, email or fax it to The Bresee Foundation's Volunteer Program at:

184 South Bimini Place, Los Angeles, CA 90004 Fax: (213) 385-8482 **ATTN: Volunteer Program** volunteer@bresee.org

Please call 213-387-2822 ext. 111 or volunteer@bresee.org with any questions you may have.

Volunteer Application Process

Complete and submit attached volunteer application.						
☐ Complete tour and interview.						
☐ Complete next steps:						
☐ Live Scan background check. Results automatically submitted.						
☐ Tuberculosis (TB) skin test (must be within last 6 months). Submit results.						
☐ Attend mandatory training/orientation if accepted.						
We will:						
☐ Complete your reference check.						
☐ Collect the results from your Livescan and TB test.						
☐ Notify you of final acceptance or rejection.						
☐ If you are accepted, we will schedule your orientation shortly thereafter.						

Bresee Volunteer Application

The following information will be used to match your experise, interests, and skills requested by the program coordinators.

Personal Information			
Name:			Date of Application://2016
How did you hear about Bresee?			Are you a Bresee alumnus? 🔲 Y 🔲 N
Home Address or PO BOX:			
City:		State: Zip	Gender: M F
Home or Work #_()	Mobile/Alterna	te #_()	
Which number do you prefer us to call first: \Box Hon	ne/Work	ternative	
Primary Email:		Date of Birt	h:/
Emergency Contact			
Name:	Relationship: _	Phor	
☐ High school/GED ☐ Technical certificate ☐ AA Name of last school attended:			ea of study:
Current Employer:			
Job Title:		Length o	f Time with Current Employer:
References			
Please provide us with 3 references that we may conta	ct prior to approving your	volunteer application.	
Please provide contact information where the p	person can be reached o	luring business hou	rs.
PROFESSIONAL			
Name:			# of Years Acquainted:
Primary #: _()	_ Secondary #: _()	
PERSONAL/FRIEND			
Name:			# of Years Acquainted:
Primary #: _(_ Secondary #: _(
PERSONAL/FRIEND			
Name:			# of Years Acquainted:
Primary #: _(_ Secondary #: _()	

Volunteer Preferences

Why are you interested in volunteering? ☐ I want to help the community ☐ I	want to gain experience			
☐ I need volunteer hours: If so, how ma		hours, by	(date).	
Volunteer Schedule and Place	cement			
Please record your preferences regarding regular schedule and serving for at least of afterschool hours (4-7pm).	• •	•	'	
Term Available: □ Fall (Sept- De	cc) 🗖 Spring (Jan - May) 📮 Sumi	mer (June – Aug)		
Days Available: ☐ Monday ☐	Tuesday 🗖 Wednesday 🗖 Thurs	day 🗖 Friday		
In what capacity would you like to volun	teer? (Check all that apply.)			
Education				
☐ Middle School (MS) HW Help/Tutori	ing			
\square High School (HS) HW Help/Tutoring	5			
☐ Gang Reduction and Youth Developm	nent Time			
Enrichment				
☐ Assist Middle School enrichment wo	orkshop (examples include STEM,	gardening, nutrition, co	ding. Complete list will be	provided at interview
stage.)				
☐ Assist High School enrichment work provided at interview stage.)	shop/time (examples include grap	hic design, multimedia,	coding, music, college prep.	Complete list will be
What qualifications/training/experience	do you have for this position?			
Behind the Scenes (Flexible scho	edule)			
College/Career Counselor Assistant				
Family Services Assistant				
Office Assistant				
GRYD Office Assistant				
Though we will do our best to place you first through third choice positions below		each position are limited	d and subject to availability.	Please indicate your
1ct·	2nd:	3rd·		

Bresee Foundation VOLUNTEER POLICY

The Application Process

The volunteer application process is designed to establish a profile of volunteers, to determine their qualification for service. During the process, Bresee staff will elicit personal information from me. It is my responsibility to ensure that the program receives any necessary information that would aid in the assessment process, knowing that this information will be kept confidential. Non-compliance will result in withdrawal of my consideration as a volunteer. I also understand that the information contained on my application will be verified by Bresee Foundation. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant or my termination as a volunteer. I acknowledge that in the event of the Bresee Foundation's determination of my ineligibility, a reason for denial will not be provided or required.

Code of Conduct

I understand that I must adhere to the following Code of Conduct at all times and that failing to do so may result in my immediate termination as a volunteer:

While encouraging the cultivation of positive relationships with students, all volunteers are expected to use good judgment and are cautioned to avoid situations including, but not limited to, the following:

- 1. Meeting individually with students behind closed doors, regardless of gender.
- 2. Remaining on site with student(s) after the last administrator leaves the site without permission.
- 3. Engaging in any behaviors, either directly or indirectly with a student(s) or in the presence of student(s) that are unprofessional, unethical, illegal, immoral, or exploitative.
- 4. Giving student(s) gifts, rewards or incentives that are not related to program activities or for which it is directly or implicitly suggested that a student(s) is (are) to say or do something in return.
- 5. Making statements or comments, either directly or in the presence of a student(s), which are not age-appropriate, professional, or which may be considered sexual in nature, harassing or demeaning. This includes comments made in jest.
- 6. Touching or having physical contact with a student(s) that is not age-appropriate or within the scope of the program.
- 7. Transporting student(s) in a personal vehicle.
- 8. Taking or accompanying student(s) off campus, except when accompanied by a staff member.
- 9. Meeting with or being in the company of student(s) off-site, except for approved activities and when accompanied by a staff member.
- 10. Communicating with student(s) outside of the center in writing, by phone/email/electronically, or via internet (including blogs, social networks, etc.) at any time.
- 11. Providing student(s) with a personal home/cellular telephone number, personal email address, home address or other personal contact information.

Property

I acknowledge that this application is the property of the Bresee Foundation. I also understand and agree that any and all materials that I design or create for use at Bresee as a volunteer will be property of Bresee. I grant the Bresee Foundation the right to use any photographs of me taken during my service, both in print and electronically.

Waiver/Assumption of Risk

I waive and release the Bresee Foundation from any liability, claim, or demands that may arise during my time of service.

Agreement

R۱	v si	σn	inσ	hel	OW.	Lacknow	edo	that I	have care	fully i	read this a	greement	fulls	understan understan	d its	contents	and	will ad	here t	o all	poli	cies as l	listed	ı
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A. P. (C.)	D. O.Y.	//2016
Applicant Signature	Print Name	Date