

◆ DeKalb Rape Crisis Center ◆ Volunteer Application ◆

Name _____

Address _____ Home Phone _____

_____ Business/Cell Phone _____

E-Mail Address (please print clearly) _____

Gender _____ Race _____ Birthdate _____

What is the highest level of education you have completed? (If currently enrolled in school, please indicate level of study/degree program.)

How did you learn about volunteer opportunities with DeKalb Rape Crisis Center?

Have you ever done crisis intervention work before? _____ If yes, what type?

Why do you wish to volunteer your time with the Rape Crisis Center?

What type of volunteer experience are you looking for at DRCC?

Crisis Line Advocate _____ Office/Administrative Support _____ Multi-Cultural Outreach _____

Speaker's Bureau/Education _____ Special Events/Fundraising _____ Other _____

I will be able to work for _____(number of) months.

I have a valid driver's license. Yes _____ No _____

I have access to an automobile. Yes _____ No _____

Do you speak a language other than English fluently? _____ If yes, which language(s)?

Please list any additional skills, training, hobbies, or interests that you would like us to know about.

Work Experience

Current or last employer: _____

Position: _____

Responsibilities: _____

Volunteer Experience

(please include involvements for last five years, starting with most recent; attach additional sheet, if needed)

1. Agency: _____

Contact: _____ Phone Number: _____

Your Activities:

Length of Involvement: _____

2. Agency: _____

Contact: _____ Phone Number: _____

Your Activities:

Length of Involvement: _____

References:

1) Name _____ Home Phone _____

Relationship _____ Work Phone _____

2) Name _____ Home Phone _____

Relationship _____ Work Phone _____

As a volunteer I will respect the client's and my fellow volunteers' privacy and maintain confidentiality concerning all aspects of my work with the Dekalb Rape Crisis Center. I will be aware of the serious nature of the work and take care to monitor the effect it has on me. I will take care of myself and keep the volunteer coordinator informed of my progress as a volunteer.

Applicant's Signature

Date