

Volunteers Needed



Greetings Potential Volunteer!

Thank you so much for expressing an interest in Volunteers of America. We are eager to share with you our current opportunities and we look forward to getting your volunteer career started with us today! All of our potential volunteers are required to be at least 18 years of age, complete an application with criminal record check and attend a group or individual information session prior to volunteering.

Current volunteer opportunities include:

- Tutoring High School Students in Science, Math, English and GED Prep
- Arts and Crafts Instructors
- Fitness Instructors
- Cooking Class Teachers
- Office and Administrative Assistance
- Dance Teachers
- Life and Career Skills Mentors
- Resume and Interview Workshop Leaders
- Computer Instructors
- Marketing and Special Events Help



Volunteers of America has over 90,000 volunteers serving over 2 million people nationwide. The goal of Volunteers of America is to provide people with the help they need to make positive changes in their lives. We help those most in need, especially the vulnerable, the hardest to serve and those facing multiple challenges. Our programs are designed not only to treat symptoms but to rehabilitate. Our professional staff and volunteers are committed to a comprehensive mission to serve the whole person.

Here in Massachusetts, we serve over 2,500 people each year. Our focus is at-risk youth, adults in recovery from substance abuse and elders in need of housing and health services. We invite volunteers to share their individual talents with our programs and we are open to any opportunity volunteers wish to provide.

If you are interested in volunteering please fill out the attached paper work and return it to:

Volunteers of America Massachusetts
Attn: Nia Grace
441 Centre Street
Jamaica Plain, Ma 02130

Best Wishes-

Nia Grace
Development & Volunteer Coordinator
617-522-8086, Ext. 230

Ngrace@voamass.org



Full Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (Home) _____ (Work) _____ (Cell) _____

Email address: _____

In an emergency, please contact:

Name: _____ Phone: _____

Relationship: _____

I. Skills and Interests

Current Occupation: _____

Company's Name: _____

Educational Background: _____

Hobbies, skills, interests: _____

Previous volunteer experience: _____

II. Volunteering Preferences

Please check any of the following preferences that interest you:

- Working on group projects with others
- Doing research, writing a newsletter, or an individual project
- Doing public speaking, training, etc.
- Working on committees to coordinate events and activities
- Working directly with a staff member
- Providing service to several clients on an ongoing basis
- Working one-on-one with a client on an ongoing basis
- Other _____
- Not sure

Please check any of the following individuals, groups or areas you are interested in working:

- At-Risk Boys
- Seniors
- Office Assistance
- Women in Recovery
- Men in Recovery
- Marketing

Why do you want to volunteer with Volunteers of America?

III. Availability

I am available to volunteer: _____ Morning _____ Afternoon _____ Evening

Days and Times I can volunteer (Check all that apply):

____ Mon. _____ Tues. _____ Wed. _____ Thurs. _____ Fri. _____ Sat. _____ Sun.

Special Occasion Volunteering (Check all that apply):

____ Halloween _____ Thanksgiving _____ Christmas _____ Black History Month

____ Valentine's Day _____ Easter _____ Memorial Day _____ 4th of July

____ Back to School Other _____ Other: _____

Would you be interested in sponsoring a party for our program residents on these special occasions?

Yes No

How often do you want to volunteer?

Weekly Monthly Occasionally Other: _____

Do you have a geographic preference as to where you do volunteer work?

No Yes. Please list preferences _____

Do you have access to transportation to get to and from your volunteer work?

Yes No

IV. Background Information

Have you ever been convicted of a criminal offense?

No Yes

If you have a disability, list any accommodations you need to volunteer.

Please list two non-related references that we may contact.

Name _____ Phone _____ Relationship _____

Name _____ Phone _____ Relationship _____

How did you hear about Volunteers of America Massachusetts?

- Volunteer or Staff member The Telephone Directory WCRB 99.5 FM
 Television Ad Our Website Other: _____

I verify that the above information is true. I understand that any false or misleading information is grounds for denying or terminating my volunteer placement. I further understand that copies of this application will be sent to the Volunteers of America Massachusetts program in which I have indicated interest. The original will be retained in my volunteer personnel file.

(Volunteer's Signature)

(Date)

PLEASE RETURN COMPLETED APPLICATION TO:

**Volunteers of America Massachusetts
Attn: Volunteer Coordinator
441 Centre Street
Jamaica Plain, MA 02130**

OFFICE USE ONLY

Received Application	CORI Check Complete	Orientation Date	Volunteer Placement

NOTES:



Volunteers of America®

MASSACHUSETTS

APPLICANT DISCLOSURE FORM

So we may evaluate your application properly, please answer all questions carefully and completely in your own handwriting.

Volunteers of America (VOA) has been authorized to perform Criminal Offender Record Information (CORI) checks on applicants for employment. A computer check with the Board of Probation is required for all candidates applying for positions. The information is requested only for the purpose of verifying the information you will be providing concerning any criminal record you have. Conviction of a crime may not be an automatic bar to your employment. All circumstances will be considered in making a decision on you application.

I understand that, in order to afford the highest level of service delivery, VOA seeks to determine that all employees within EOHHS agencies are of the highest integrity. As an applicant for employment, I hereby acknowledge that if I am selected for employment, VOA will review:

- Criminal Offender Record Information (CORI) and;
- The Central Registry of Child Abuse / Neglect reports maintained in accordance with M.G.L., Chapter 119, Section 51B (for Department of Social Services, Department of Youth Services, and Office for Children applicants only.)

The following spaces may be used to provide VOA with any information which you feel could assist us in processing the results of the CORI and Central Registry reviews.

Signature

Date

I do not wish to be considered for employment because I do not want a CORI to be conducted.



CORI REQUEST FORM

XVOLOM
EOHHS

Volunteers of America of Massachusetts, Inc. has been certified by the Criminal History Systems Board for access to conviction and pending criminal case data. As a (prospective) volunteer for the position of _____, I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

Program Name _____
Applicant/ Employee Signature

APPLICANT/ EMPLOYEE INFORMATION (PLEASE PRINT)

LAST NAME **FIRST NAME** **MIDDLE NAME**

MAIDEN NAME OR ALIAS (IF APPLICABLE) **PLACE OF BIRTH**

DATE OF BIRTH **SOCIAL SECURITY NUMBER** **MOTHER'S MAIDEN NAME**
 (Requested but not required)

FORMER ADDRESSES: _____

SEX: _____ **HEIGHT:** ___ft. ___in. **EYE COLOR:** _____

STATE DRIVER'S LICENSE NUMBER: _____

*****THE ABOVE INFORMATION WAS VERIFIED BY REVIEWING THE FOLLOWING FORM OF GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION:**

REQUESTED BY: _____
SIGNATURE OF CORI AUTHORIZED EMPLOYEE

EMPLOYER USE ONLY
DATE SENT: _____ **DATE RETURNED:** _____

Form in use as of 7/1/05
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