



P.O. Box 4932, Greenville, Mississippi 38704

Volunteer Application

Thank you so much for your interest in volunteering with Nurturing Transition Home for Youth.

Enclosed you will find documents that NTHFY requires of applicants to be consider for volunteer opportunities. These documents include:

- Volunteer Application
- Volunteer Statement Addendum
- Liability Waiver Form

Listed below are some of the ways volunteers can serve. (Other methods of volunteering will be considered as well.)

1. Volunteer by setting up a workday for you or your team. Help our maintenance staff with some bigger projects that can range from painting, to campus beautification, etc... You can volunteer for a morning, afternoon or all day.
2. A second way that you volunteer is by setting up a day to come and do an activity with our kids. This can be organizing a field day, coming to play ball, doing a cook out for the kids, organizing an ice cream social, etc... The possibilities are endless with this one.
3. The third way is to organize a drive to collect commodities for the Children's Home. Receiving commodity items is always a tremendous blessing, as we tend to go through them quickly.
4. A fourth way is to adopt NTHFY and make monthly or quarterly visits out to see them. These visits could include groups doing a crafts, bringing a special treat such as pizza or dessert, etc...

We look forward to working with you in serving our children!



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Volunteer Application

(Volunteer position title)

SECTION I

Date _____

Name _____

Address _____ City _____ State _____ Zip _____

Home Phone: _____ Work Phone: _____ E-mail: _____

SECTION II

Previous Volunteer Experience _____

Occupation (Past occupation if retired): _____

Other information that will help us make a good match (such as education, general interests/hobbies)

Languages Spoken: _____

SECTION III

Availability and Volunteer Assignment Preferences

Please Check All That Are Applicable:

I Am Available	<input type="checkbox"/> Mornings (Mon-Fri)	<input type="checkbox"/> Afternoons (Mon-Fri)	<input type="checkbox"/> Evenings (Mon-Fri)
	<input type="checkbox"/> Weekends	<input type="checkbox"/> Once A Week	<input type="checkbox"/> More Than Once A Week
	<input type="checkbox"/> One Time Only	<input type="checkbox"/> As needed	<input type="checkbox"/> OTHER

I Could Serve More Than One Person: Yes No



SECTION IV

Do You Have A Valid (State) Driver's License? Yes No

License Number: _____ Vehicle License Plate Number _____

Insurance Company: _____ Policy #: _____

Do You Have Any Physical Condition that May Limit Your Activities? Yes No

If Yes, Describe: _____

Who To Notify In Case Of An Emergency? _____

Telephone Number: _____

SECTION V [References]

Please list three persons we may call who are NOT family, one of who may be your religious or spiritual leader, teacher, employer or relationship other than personal friend.

Name _____ Phone _____

Address _____

Relationship _____

Name _____ Phone _____

Address _____

Relationship _____

Name _____ Phone _____

Address _____

Relationship _____

Comments:



I hereby give my consent to contact my references; to contact my employers, past and present; and to conduct a background check.

Signature Of Applicant

Date



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LIABILITY WAIVER FORM

Organization/Name _____

Address: _____

Representative: _____

Facility/Service Requested: _____

Date and Time Facility Reserved: _____

Description of Activities: _____

I, _____ hereby waive Nurturing Transitional Home For Youth and staff from any liability of injury, loss or damage to personal property association with activities participated in this event.

I acknowledge that I understand the waiver described in this document. Waiver is made to the maximum extent permissible under applicable law. I acknowledge that I have signed this document under my own free will.

Participant Printed Name

Participant Signature

Date

Waiver must be signed by parent/guardian if participant is less than 18 years old:

Participants Name

Parent/Guardian Signature

Date



Statement Addendum to Volunteer Application on File

Please be made aware that, due to licensing guidelines, the following statements need to be signed and dated and placed in your respective volunteer file.

I, hereby certify that I have not abused or neglected a child, or have been a respondent in a juvenile court proceeding that resulted in the removal of a child, or have had child protective services involvement that resulted in the removal of a child.

In addition, I confirm that I have not abused, neglected or exploited a disabled adult.

Furthermore, I also declare that I have never been a domestic violence perpetrator.

Signed

Date