



## Volunteer Application

The first step in becoming a volunteer with OneEighty is to complete a volunteer application. All volunteers must participate in a face-to-face interview and provide reliable references.

### Contact Information

<b>Name:</b>		<b>Date:</b>	
Other names you have been known by (Maiden Name, etc.):		<b>Address:</b>	
Cell/Preferred Phone #(s):		<b>OK to Text?</b>	
<b>Email:</b>	<i>The majority of Volunteer communication is through email!</i>		

<b>Are you 18 years of age or older?:</b>		(Please initial for yes/ leave blank for no)
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### Volunteering Interest

*Please order your department preference with 1 being the highest and omit areas in which you are not interested (requirements and opportunities can be discussed during interviews and orientation. Higher level positions have more requirements.):*

Level 1:	Level 2:	Level 3:	
Go-2-Girls & Guys/Donation Room*	Support Staff/Clerical*	Hospital Advocacy	
Event/Projects	Office Assistant/Data/Filing*	Shelter/Residential	
Maintenance Assistant*	Community Outreach/Awareness or MWFC	Community Education Assistant *	

\*Positions are only available during open office hours. Please see website or Volunteer Coordinator for current hours.

### Availability

<b>Sunday:</b>		<b>Thursday:</b>	
<b>Monday:</b>		<b>Friday:</b>	
<b>Tuesday:</b>		<b>Saturday:</b>	
<b>Wednesday:</b>			

### Volunteer and/or Work Experience

*Please list your last three volunteer or work positions:*

Agency/Organization	Start Date-End Date:	Description of Duties:



Helping people change direction.

**Special Skills/Qualifications**

Please list any special skills you would like OneEighty to know about:

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**Education**

Please list any educational experience you would like OneEighty to know about:

School:	Major/Degree/Completion Date:

**References**

Please list three professional or academic references:

Name/Credentials:	Phone:	Email Address:	Relationship to You:	Years Known:

**Agreement/Verification**

It is the policy of OneEighty to provide equal opportunities, which means we follow the rules and regulations governing Fair Employment Practices. In addition, OneEighty will respect the applicant’s right to privacy and the results of any background checks or any other information regarding the applicant will be treated in confidence.

Please indicate your agreement by initialing after each sentence/paragraph and signing under the verification:

	Initial:
I understand that completion of the application, interview, and/or training does not guarantee a volunteer opportunity.	
I understand that anywhere from 3 to 20 hours of Domestic Violence & Substance Abuse core training are required in order to provide services at OneEighty and that the fee for training is waived with my one year commitment to Volunteer with OneEighty.	
I understand that as a volunteer I may be required to complete and pass a test for illegal drug use.*	
I understand that my volunteer position may require that I be screened for Tuberculosis (TB).*	
I understand that Level 2 and Level 3 Volunteers must submit fingerprinting to the Ohio Bureau of Criminal Identification & Investigation (BCI) and if I have lived outside of the state of Ohio in the past 5 years I must also submit fingerprinting to the Federal Bureau of Investigation (FBI).*	
I understand that if I will be working any Level 3 position as a volunteer with OneEighty I must be 21 years of age and I must provide OneEighty with proof of my high school diploma/equivalency.	



I understand that if I will be driving company vehicles as a volunteer for OneEighty, I must submit current copies of my Driver's License and Insurance, and that a driving background check will be completed.	
I understand that volunteers are required to provide a minimum of 2 hours of service per week (or the equivalency) for at least one year.	

**VERIFICATION SECTION CONTINUED ON NEXT PAGE**

By signing after these verification statements and submitting this application to OneEighty, I understand:

- I am hereby stating that all the above information is current, valid and correct to the best of my knowledge, and I authorize investigation of all statements contained in this application.
- I understand that misrepresentation or omission of facts is cause for dismissal.
- I am releasing OneEighty and its agents, associates, and related parties from all responsibility for personal injuries to me and damages to my property sustained in the performance of my volunteer activity.
- I know I will not be paid for my volunteer time and OneEighty is not required or expected to offer me a job at the conclusion of my volunteer commitment.

Name (print):	
Verification Signature:	
Date:	

*\*Drug Screening, Tuberculosis Screening, and Fingerprinting Background Checks are not completed by or at OneEighty. It is the responsibility of individuals who have been hired as Volunteers with OneEighty to properly complete these tests, and ensure that the information is sent/provided to the Volunteer Coordinator for verification. Copies of all testing results must be kept in the volunteer's personnel folder.*

**Emergency Contact**

Name:	
Relationship:	
Phone:	
Address:	

What accommodations (if any) do you need in order to fully participate in training? \_\_\_\_\_  
 \_\_\_\_\_

Please tell us anything else about yourself that you would like us to know: \_\_\_\_\_



**Thank you for completing this application form and for your interest in volunteering with us!**

Email, mail, or fax this completed form to:

Attn: Volunteer Coordinator

OneEighty, Inc.

104 Spink Street, Wooster, OH 44691

[info@one-eighty.org](mailto:info@one-eighty.org)

Fax: 330.264.3777