



Volunteering at Jonathan's Place

Thank you so much for your interest in volunteering to help the abused, abandoned and neglected children helped by Jonathan's Place. Here are the steps to becoming an individual volunteer.

Step 1: Complete the application.

Once you complete the application, we submit your information for a background check.

Step 2: Volunteer Orientation.

Orientations are offered once per month. If you are unable to attend the scheduled orientation you may schedule a one-on-one session to begin volunteering by, contacting our Volunteer and Youth Engagement Manager

Step 3: Get your fingerprint registered with the FBI.

This is a state requirement starting in March 2014. There is a cost of approximately \$42 that you pay directly to the fingerprint service. You do receive a tax deduction for that fee.

Step 4: Get a TB test.

After you complete the application, you will receive a form that allows you to schedule a free appointment at any area CareNow.

Step 5: Start Making a Difference.

With all of the background checks and tests completed, you are able to schedule your first shifts. We look forward to seeing you.

For questions, contact Landon Cole, Volunteer and Youth Engagement Manager, at 972-303-5303 ext. 248 or lcoble@kidnet.org.



Jonathan's Place Volunteer Application

Thank you for your interest in volunteering at Jonathan's Place. Acceptance as a volunteer will be contingent upon satisfactory completion of a background check and TB.

Contact Information			
Name		Social Security Number	Today's Date
Home Address - No. & Street		City	State Zip
If less than 3 years at above, please list prior address		City	State Zip
Home Phone	Cell Phone	Work Phone	E-mail
Driver's License Number	State	Type	Are you legally entitled to work in the U.S.? [] Yes [] No
Have you ever been convicted of, pled guilty or nolo contendere (no contest) to, or received probation or deferred adjudication for a felony or misdemeanor, or are you presently under indictment? (A positive response to this question does not necessarily disqualify you from volunteering, but an untruthful response does.) [] Yes [] No If yes, give date, location and disposition of case.			
Would you agree to a background investigation, pre-volunteer and/or post-volunteer drug screening by a physician, clinic or other health care provider selected by the company? [] Yes [] No			
Have you previously applied for employment or to volunteer with Jonathan's Place? [] Yes [] No If yes, when/what position?			
List names of any relatives employed by or volunteering at our agency and their relationship to you.			
Have you ever been terminated/discharged from employment or asked to resign in lieu of termination? [] Yes [] No If yes, give reason and date.			

Emergency Contact Information		
Name:		Relationship:
Cell Phone	Home Phone:	Work Phone:
Name:		Relationship:
Cell Phone	Home Phone	Work Phone:
Physician:		Phone:
Allergies or Medical Conditions we should be aware of:		

Personal/Professional References

Please list two personal and one professional reference.

Name	Email	Phone	Years Known

Volunteer Opportunities

Which of the following volunteer opportunities interest you?

- ☐ Administrative Support: Assist with filing, copies, organizing paperwork, and mailings for case workers and administrative staff.
- ☐ Front Desk Assistance: Answer phones, welcome guests, accept deliveries, and other duties requested by staff.
- ☐ Facilities Assistance: Occasional janitorial work, handyman services, grounds cleanup, and other duties as requested by staff.
- ☐ Meal Deliveries: Deliver meals to the Emergency Shelter & Girls Treatment Center. Meals must come from a commercial kitchen or pre-prepared by a store or restaurant.
- ☐ Donation Center: Welcome and receive donations, sort items, put items away or prepare them for donations.
- ☐ Girls Treatment Center: Assist with young ladies from ages 10 to 17 years of age. Tasks might include: Helping with homework, playing games, creative activities, watching movies, teaching fun life skills, scheduled group outings assistance
- ☐ Mentorship in Girls Treatment Center: Additional volunteer training and interviews required. One-on-one mentorship with a young lady in our girl's treatment program. Must be able to make a commitment of one day per week for a 6 month period. Tasks might include: Helping with homework, playing games, and if eligible going on an outing.
- ☐ Emergency Shelter: Assist in the Emergency Shelter children from ages newborn to 17 years of age. Tasks might include playing games, reading stories, helping with meals, scheduled group outings assistance. Please note that volunteer times in the Emergency Shelter are first given to foster parents working towards observation hours.
- ☐ Special Event Staffing: This would be an opportunity for our regular volunteers to help with agency special events, including the Spring Luncheon, Golf Classic, Angel Tree and other events.
- ☐ Safe Place: Assist with Safe Place calls, Youth Presentations and administrative work. Additional training required.
- ☐ Welcome Committee: Working with staff to pull items from our donation center and/or go shopping with a provided gift card for items needed for a brand new child at Jonathan's Place.

Time Commitment

For what length of time can you commitment to volunteering: ☐ 6 months ☐ 12 Months ☐ Indefinite ☐ Other:

What is your availability?

	Morning Hours	Afternoon Hours	Evening Hours	1 X Month	2 X Month	3 X Month	4 X Month
Monday							
Tuesday							
Wednesday							
Thursday							
Friday							
Saturday							

Additional Questions

Why do you want to work with and/or care for children?

With what age group and gender do you prefer to work with? Why?

What is your philosophy about discipline?

What do you do when you are upset or angry about something?

Are you a pedophile or child abuser? ☐ Yes ☐ No

Have you ever been accused or convicted of a criminal offense (felony or misdemeanor including plea agreements and deferred adjudication) of being a pedophile or child abuser? ☐ Yes ☐ No If yes, please explain.

Have you ever been charged with a sexual offense, any offense relating to children or a crime of violence?

☐ Yes ☐ No If yes, please explain.

Have you ever been the subject of a civil lawsuit involving sexual misconduct, violence, or injury involving children?

☐ Yes ☐ No If yes, please explain.

Have you ever been reported, had a complaint filed, or been subject to any disciplinary action from any organization of professional registry or, is any disciplinary action or investigation currently pending for violence, abuse, sexual misconduct or misconduct involving children? ☐ Yes ☐ No If yes, please explain.

I HEREBY AFFIRM THAT MY ANSWERS TO THE FOREGOING QUESTIONS ARE TRUE AND CORRECT. I UNDERSTAND THAT ANY FALSE INFORMATION SUBMITTED IN THIS APPLICATION MAY RESULT IN MY DISCHARGE. I FURTHER UNDERSTAND THAT ALL APPLICATIONS ARE SUBJECTED TO A CRIMINAL BACKGROUND CHECK.

Signature: _____

Date: _____