



Volunteer Application

SWIRCA & More 16 W. Virginia St.
P.O. Box 3938 Evansville, IN 47737-3938
Phone: (812) 464-7800 or Toll Free: (800) 253-2188
Fax: (812) 464-7843 www.swirca.org

FOR OFFICE USE:

- Application Received
- Orientation Received
- Interview Scheduled
- Interview Scheduled
- HIPPA Training Complete
- Background Check Sent
- Notes:

For more information contact Kim Morehead
(812) 492-7462 | kmorehead@swirca.org

Today's Date: _____

General Information

Legal Last Name:	Legal First Name:	Middle Initial:		
Preferred Name:	Suffix:	Marital Status:		
Preferred Mailing Address:				
City:		State:	Zip Code:	Country:
Home Phone: ()	Cell Phone: ()	Email: ()		
Birth Date:	Under 18? <input type="checkbox"/> No <input type="checkbox"/>	How did you hear about SWIRCA & More Volunteer Opportunities?		
Have you ever been convicted of a crime or minor violation in the past 24 months? <input type="checkbox"/> yes* (if yes, please explain) <input type="checkbox"/> no				

Emergency Contact Information

Name (Last, First):	Relationship:
Phone Number:	Alternate Phone:

SWIRCA & More

Are you now or have you ever been a volunteer or employee of SWIRCA & More? <input type="checkbox"/> No <input type="checkbox"/> Yes
If yes, please list position, and dates:

Education and Training

Highest Education Level:	Degree/Major:
School/University:	Date(s):
Current or Most Recent Occupation and Employer:	
Are you currently enrolled in school? <input type="checkbox"/> No <input type="checkbox"/> Yes	

Professional Licenses

Title:	No.	Issue Date:	State:	Exp. Date:
Are you licensed to operate a motor vehicle? <input type="checkbox"/> No <input type="checkbox"/> Yes If yes, which state? _____ Number: _____ Exp. Date: _____				

Availability: From Date:

		Long Term			Short Term	
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning
<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon
<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening

Why are you interested in volunteering with SWIRCA & More:

__ School/Court/Organization Requirement I must complete _____ hours by _____ date
__ Other: _____

Languages other than English	Speak	Read	Write
	<input type="checkbox"/> High <input type="checkbox"/> Moderate <input type="checkbox"/> Low	<input type="checkbox"/> High <input type="checkbox"/> Moderate <input type="checkbox"/> Low	<input type="checkbox"/> High <input type="checkbox"/> Moderate <input type="checkbox"/> Low
	<input type="checkbox"/> High <input type="checkbox"/> Moderate <input type="checkbox"/> Low	<input type="checkbox"/> High <input type="checkbox"/> Moderate <input type="checkbox"/> Low	<input type="checkbox"/> High <input type="checkbox"/> Moderate <input type="checkbox"/> Low

Check activities in which you are interested:

<input type="checkbox"/> Hospitality Greeter	<input type="checkbox"/> Entertainment	<input type="checkbox"/> Health and Wellness	<input type="checkbox"/> Meal Service
<input type="checkbox"/> Admin/Clerical Support	<input type="checkbox"/> Communications/Mktg	<input type="checkbox"/> Fitness Instruction	<input type="checkbox"/> Handyman/Maintenance
<input type="checkbox"/> Event Planning	<input type="checkbox"/> Auction	<input type="checkbox"/> Internship	<input type="checkbox"/> Small Project Construction
<input type="checkbox"/> Event Decorating	<input type="checkbox"/> Indiana State Games	<input type="checkbox"/> Special/Group Project	<input type="checkbox"/> Other _____
<input type="checkbox"/> Event Set-up	<input type="checkbox"/> BrewFest	<input type="checkbox"/> Project Coordination	

Check activities in which you have skills:

<input type="checkbox"/> Admin/Clerical Support	<input type="checkbox"/> Event Decorating	<input type="checkbox"/> Presentations/Instruction	Comments:
<input type="checkbox"/> Client/Customer Services	<input type="checkbox"/> Event Set-up	<input type="checkbox"/> Project Coordination	
<input type="checkbox"/> Crafts/Hobby Skills	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Training/Development	
<input type="checkbox"/> Communications/Mktg	<input type="checkbox"/> Food Service	<input type="checkbox"/> Transportation	
<input type="checkbox"/> Party Decorating	<input type="checkbox"/> Healthcare/Wellness	<input type="checkbox"/> Facilities Management	
<input type="checkbox"/> Event Planning	<input type="checkbox"/> Fitness Instruction	<input type="checkbox"/> Other: _____	

I hereby certify that the facts set forth in this application are true and complete to the best of my knowledge. I understand that false statements of any kind or omission of facts called for on this application are a basis for dismissal as a volunteer regardless of when they are discovered. I understand that I am not applying for employment with SWIRCA & More, but rather a volunteer position which can be terminated at any time by me or SWIRCA & More. I do hereby hold SWIRCA & More harmless from any liability, whether civil or criminal that may arise as a result of the release of this information about me. I further hold harmless any individual, agency, business, or corporation that provides information or documents to the above-named SWIRCA & More organization. I understand that SWIRCA & More will use this information as part of its verification of my volunteer application and periodically for evaluation purposes.

Signature of Applicant: _____

Date: _____

OPTIONAL SELF-ASSESSMENT FOR VOLUNTEER APPLICANTS

SWIRCA & More is an equal opportunity employer. In recognition of its responsibility to its paid and volunteer staff, and the community it serves, SWIRCA & More affirms its policy to assure fair and equal treatment in all of its employment practices for all persons. We consider applicants for all positions without regard to race, color, religion, sex, age, national origin, disabled or veteran status, or other legally protected status. To help us track our organizational success, we ask your assistance in filling out this voluntary self-identification form. In addition to our internal tracking, SWIRCA & More must meet government record-keeping and reporting requirements.

Completion of this form is voluntary, and will not affect your application. This information will be kept in confidence and will not accompany your application to the prospective supervisors.

Check One:

- Female
- Male

Check One:

- White
- American Indian or Alaskan Native
- Asian
- Black or African-American
- Native Hawaiian/Other Pacific Islander
- Two or More Races
- Hispanic or Latino
- Decline to Answer

Please Return This Form To SWIRCA & More

Drop Off: 16 W. Virginia St., Evansville IN 47710

Fax: (812) 464-7843

Mail: PO. Box 3938 Evansville, IN 47737-3938

Email: kmorehead@swirca.org

SWIRCA & More
Confidentiality Agreement

29.1 Confidentiality. While working at SWIRCA & More, employees and volunteers will receive confidential information about clients, volunteers, and fellow employees of SWIRCA & More as well as confidential information relating to SWIRCA & More's business, clients, operations and services. As used herein, "Confidential Information" shall mean all ideas, suggestions, innovations, conceptions, discoveries, improvements, methods, processes, specifications, compositions, techniques, systems, notes, memoranda, work sheets, lists of actual or potential clients, data and information in any form and on any medium which SWIRCA & More treats as confidential or that concern or relate to any aspect of the actual or contemplated business of SWIRCA & More, including, without limitation, any market research, technical or scientific research and business or marketing plans. All employees and volunteers are expected to maintain confidence concerning these matters. Any request for information concerning a client, volunteer, or fellow employee of SWIRCA & More or concerning a business related matter should be referred to the employee's supervisor, who will determine the appropriate response. Any violation of this rule will result in disciplinary action up to and including discharge. Neither the employee or volunteer nor any of the employee's agents or representatives will disclose, take or use any confidential information, either directly or indirectly without the prior, written authorization of SWIRCA & More or as may be required by any court or governmental agency, provided that employee shall promptly notify SWIRCA & More of employee's receipt of any notice regarding disclosure of confidential information requested by any Court order or governmental agency to permit SWIRCA & More to oppose the disclosure of the confidential information. This policy prohibits the taking, use and disclosure of confidential information and should not be construed as limiting the employee's right to undertake any other employment or business activity. Employee and volunteer agrees that SWIRCA & More would suffer severe, irreparable harm in the event there is an unauthorized disclosure or use of confidential information and that in addition to any other remedies.

Signature

Date

Reviewed 1.1.14