

HOPE STARTS TODAY

Recovery Support Group



VOLUNTEER APPLICATION

Our organization encourages the participation of volunteers who support our mission. If you agree with our mission and are willing to be interviewed and trained in our procedures, we encourage you to complete this application. The information on this form will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you. Thank you for your interest in our organization.

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Employer: _____ Position: _____

Any special talents or skills you have that you feel would benefit our organization?

Interests:

Please tell us in which areas you are interested in volunteering

Administration

Child Care (During Recovery Support Meetings)

Events

Program

Fundraising

Deliveries

Communication

Transportation (must have a VALID MI operator's license and clean driving record)

Please indicate days and times available:

Mon: From _____ to _____

Tue: From _____ to _____

Wed: From _____ to _____

Thu: From _____ to _____

Fri: From _____ to _____

Sat: From _____ to _____

Any physical limitations? _____

In case of emergency contact: _____ Phone: _____

As a volunteer of our organization I agree to abide by the policies and procedures. I understand that I will be volunteering at my own risk and that the organization, its employees and affiliates, cannot assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform for the organization. I agree that all the work I do is on a volunteer basis and I am not eligible to receive any monetary payment or reward. By signing this you agree to an in depth screening of your background.

Signature: _____ Date: _____

Volunteer Confidentiality Agreement

This agreement applies to all volunteers associated with and/or involved in the activities or affairs of Hope Starts Today Recovery Support Group of Marquette County, MI. This includes all activity associated with Hope Starts Today Recovery Support Group of Marquette County, MI at its main office and any future outreach sites locations.

All data, materials, knowledge and information generated through, originating from, or having to do with Hope Starts Today Recovery Support Group of Marquette County, MI or persons associated with our activities, including contractors, is to be considered privileged and confidential and is not to be disclosed to any third party. All pages, forms, information, designs, documents, printed matter, policies and procedures, conversations, messages (received or transmitted), resources, contacts, e-mail lists, e-mail messages, client, staff or public information is confidential and the sole property of Hope Starts Today Recovery Support Group of Marquette County, MI. This also includes, but is not limited to, any information of, or relating to, our staff, clients, volunteers, operations and activities. This privilege extends to all forms and formats in which the information is maintained and stored, including, but not limited to hardcopy, photocopy, microform, automated and/or electronic form.

Client information, including all file information, is not be disclosed to any third party, under any circumstances, without the consent of the Hope Starts Today Recovery Support Group of Marquette County, MI staff that is supervising you.

Any disclosure, misuse, copying or transmitting of any material, data or information, whether intentional or unintentional, will subject you to disciplinary action and/or prosecution, according to the procedures set by Hope Starts Today Recovery Support Group of Marquette County, MI and any applicable laws.

My signature signifies I agree to these terms and will abide by, adhere to and honor all of the above.

Signature of Volunteer

Date

Signature of Hope Starts Today staff supervising volunteer

Date