

Volunteer Application

CONTACT	INFORMATI	ION							
Name	me Date of Application								
Address									
City		State: Zip							
Home Phone	:	Mobile							
Email Addre	SS								
What are yo	_	t erests? Please ment/Program	e see volunteer	opportuni	ities l	list.	Activity		
1									
2									
3									
T 1:4 - 41	.l			- la la la l	1 •	66-22 :- 41		- h ()	
indicate the	Monday	Tuesday	you are avail Wednesday	Thursda		Friday	Saturday	Sunday	
Morning	j	3				-	<u> </u>	-	
Afternoon									
Evening									
How did you learn about Mountain Resource Center?									
Why do you want to volunteer with us?									
WORK HIS	TORY								
Name of Em	ployer:								
From: To:					Job Title:				
Duties:		I							
Name of Em	ployer:								
From: To:				Job Title:					
Duties:									
VOLUNTE	ER EXPERIE	NCE							
Name of Organization									
Duties									
Name of Org	ganization								
Duties									

EDUCATIONAL H	IISTORY	7						
Are you a student?	Yes □	No □		Are you required to volunteer?	Yes□	No□		
High School								
College								
PROFESSIONAL T	ΓRAININ	IG. SKILLS. (OR AREAS (OF EXPERTISE				
THOT ESSIOTHER		(0,511125, (
COMMUNITY AF	FILIATI(ONS (clubs, se	rvice organiz	ations, etc.)				
		, ,	<u> </u>	, ,				
FOR BACKGROU	ND CHE	СК						
Date of Birth								
Have you ever been	convicted	of a felony?	Yes	No				
If yes, please explain	l .							
EMEDCENCY CO								
EMERGENCY CO Name:	NIACI			Phone Number:				
Relationship:			Alternate Phone:					
Do you have any mo	edical con	nditions of whi	ich we should	l be aware?				
Notification and Ag	reement	(Please read b	efore signing	<i>f</i>):				
•		•	*	complete. I understand that the fal	,			
				or any other accompanying or requi- issal from volunteer work regardless				
discovered.	iai oi voic	inteer opportun	indes, or dism	issai from volunteer work regardles.	, or when c	л now		
	A	UTHORIZATIO	ON TO RELEA	ASE INFORMATION:				
As an applicant I author	· · · · · · · · · · · · · · · · · · ·			at you have concerning me, including C	RIMINAL			
				f a confidential or privilege nature. I he				
information.	State of Co	olorado and otne	rs from any 11a	bility or damage, which may result from	n turnisning	g tnis		
Signature				Date				
MDC STAFE NOT	EC							
WRC STAFF NOT: Volunteer Team	E/S		N	IRC Supervisor				
Committee or Position	on		I	Pate Began Volunteering:				
Background Check A	Approved:	(date/initial)						
Notes:								

VOLUNTEER POLICIES

Volunteers are essential to the operation of Mountain Resource Center. Volunteers supplement positions for which funds are limited or not available and they act as the conduit between the community and the Center. They bring in new ideas, vitality, consumers, education and more volunteers. Thank you so much for sharing your time and talents today with our community by volunteering your time and talents with MRC.

Specific Assignment

I agree to perform my duties as specified in the volunteer description. In addition, I will follow the rules and regulations established for the specific area I am asked to cover. Any questions outside of the realm of my volunteer status will be directed to my supervisor or an MRC Staff Member.

Volunteer Hours Reporting

Due to the nature of non-profit services provided by the Mountain Resource Center, it is important that we accurately track and report all volunteer hours. It is your responsibility to submit a monthly "Hours Report" to your supervisor.

In addition to reporting your actual hours, it is also important to notify your immediate supervisor if you are going to be late or are unable to cover a shift, event or other time slot that you have agreed to volunteer.

Confidentiality

Our clients and other parties with whom we do business entrust the Mountain Resource Center with a variety of personal information, sometimes of a physical, emotional, spiritual or financial nature. It is our policy that all information considered confidential will **not** be disclosed to external parties or to any individual without a "need to know." If there is a question of whether certain information is considered confidential, the volunteer should first check with his/her immediate supervisor.

This policy is intended to alert volunteers to the need for discretion at all times.

All inquiries from the media must be referred to your supervisor.

Drug-Free Workplace Policy

Mountain Resource Center is a drug-free workplace. It is MRC's policy to prohibit the unlawful manufacture, distribution, possession, or use of a controlled substance during company time, on company premises, or other work sites where MRC is being represented. Failure to comply with this requirement will result in dismissal from volunteer services.

Alcohol distribution, dispensation, possession or use is also prohibited unless deemed appropriate by a supervisor for an authorized event.

I acknowledge that I have read and understand the above statements and hereby grant permission to confirm the information supplied on this application by me.

Signature	Date	