

Date of Application:

### **PERSONAL INFORMATION:**

Name:		DOB:
CA Driver's License #		
Address:		
City:	CA	Zip:
Phone:		
Email:		
**We will co	ntact you via email unless otherwi	ise indicated**

## **EMPLOYMENT INFORMATION:**

Employer:								
Position:						Select One:	Part Time	Full Time
EDUCATION:	Please	e mark	highes	t level d	of education completed			
High School:	9	10	11	12	Bachelor's Degree	Some College	Graduate [	Degree

## LANGUAGES SPOKEN FLUENTLY OTHER THAN ENGLISH:

**VOLUNTEER PROGRAM CHOICES:** Please rank your top **two (2)** volunteer program choices from those listed below:

D	Direct Services * (see requirements below)		Non-Direct Services	
	Domestic Violence/Sexual Assault Response Team (priority placement in training)		Fundraising/Special Events	
	Helpline/Shelter Support		Outreach/Public Speaking	
	Court Advocacy		Office Work	
	Support Groups Children		General Labor	
	Support Groups Adults		Other:	



## \* DIRECT SERVICE REQUIREMENTS - Complete if selected as desired volunteer program above

	Νο
	<b>ervice volunteers</b> to complete a State approved <u>65-hour training</u> to and Sexual Assault Counselors before becoming an active volunteer for
in certifica	tion, volunteers must attend <u>bimonthly in-service meetings</u> . Do you agree to
Yes	Νο
	ervice volunteers to undergo a background check and fingerprinting with the timent. Do you agree to these requirements upon completion of volunteer
Yes	Νο
ve voluntee	ervice volunteers to sign a confidentiality commitment form before or for NEWS. Do you agree to this requirement upon completion of the
Yes	Νο
VIOLENCE	E AND SEXUAL ASSAULT RESPONSE TEAM VOLUNTEERS:
imum con	<b>nmitment</b> of two (2) shifts each month as well as bimonthly in-service
o at least 2	shifts per month for at Least 12 months? <b>No</b>
	<u>violence a</u> in certifica Yes ill direct so riff's Depai Yes Yes Yes VIOLENCE imum con

How did you hear about NEWS?

What attracted you to volunteer at NEWS?

What kind of training, if any, do you have in the human services field?



# Are you (or is someone close to you) a survivor of domestic violence or sexual assault? If so, have you ever used a NEWS service?

Yes	No	f yes, what was last date of service?
100		yee, what was last date of solvice.

## **REFERENCES**:

Please list at least 2 people who are not relatives and whom you have known for a minimum of 1 year:

Name	Telephone	Relationship

Additional comments:

Volunteer Candidate Signature

Date

Parent/Guardian Signature

*If Volunteer Candidate is a minor.* 

Date

#### Submit application by:

- Email to <u>KassyM@NapaNEWS.org</u>
- or Drop off at: NEWS
  1141 Pear Tree Lane, Suite 220 Napa, California