

208 Glenwood Avenue Kinston, NC 28501 Ph: 252-523 5573 Fax: 252 523-9888

E-mail: sproctorsafe@yahoo.com

SAFE in Lenoir County, Inc. VOLUNTEER APPLICATION

Dear Prospective Volunteers,

Thank you for considering SAFE as a place to donate your time and talents. Volunteers are vital to SAFE. Without them, we wouldn't be able to meet the needs of the Clients we serve. At SAFE, we know that your time and talent are precious, and we want every minute you spend with us to be worthwhile. That's why we're asking you to take a few minutes to fill out this application. It will help us begin to make the right match between your skills and interests and the opportunities available.

You will find questions on this form about your education, employment, and availability. We reserve the right to conduct background and reference checks on all volunteers. You will also be asked to sign a Confidentiality Agreement form. It's just one of the many ways we help protect our clients served by SAFE.

Thank you for your cooperation in this effort and your interest in SAFE. If you have any questions about this or any part of our application process, please contact me at 252-523-5573.

Thank you in advance for your time,

Carolyn Fields

Director of Victim Services

Carolyn Fields



SAFE VOLUTEER APPLICATION

Please print:						
First Name		Last	Name			
Address	ddress					
Telephone	elephone					
Physical Limitation	ns: No Yes (Plea	ase Explain):			•••••	
Education (highest	level completed)					
Grades 1-5 6-9	11-12 College	e Business	Graduate School Technic	cal/Vocationa	al	
Former work/occu	pation	mo	ost recent employer (opti	onal)		
List previous volun	iteer experience					
Skills (List your sk Amateur	ills and indicate pro	oficiency level)		Skilled	Can Teach	
1						
2						
3						
Volunteer availabil	lity: (Circle all appl	licable)				
At	least once a week	-	About once a month		_About twice	
	No more tha	n once a month	When there is	a specific ne	eed	
What days are best	t for you:Monda	•	WednesdayThursda	nyFr	iday	
Check on or more	interested areas:					
Phone	AidCourt Ac	dvocacyR	ape/Crises Child Care	e Provider _	Office Aide	
		_Fundraising _	Community Awareness	s		
Please explain briefl	ly why you are intere	9	•			
•		J				
List three personal o	or work references:					
Volunteers hereby a	gree to serve any cli	ent who is assig	gned regardless of race, sex	x, creed or na	tional origin.	
(Signature/V	olunteer)		(Signature/St	aff) (Date)	