



## City Mission of Findlay Volunteer Application

---

**Full Name:**

\_\_\_\_\_

Last

\_\_\_\_\_

First

\_\_\_\_\_

M.I.

**Address:**

\_\_\_\_\_

Street Address

\_\_\_\_\_

City

\_\_\_\_\_

State

\_\_\_\_\_

Zip

**Email:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Can you receive texts:**

Yes

No

---

**How did you become interested in volunteering at City Mission?**

**Circle any times that might work well for you to volunteer:**

Lunch 10:30-1:00p

Food Prep 1:00-3:00pm

Dinner 4:00-6:30pm

Weekdays

Weekends

**Would you like to sign up for a routine time slot ?**

Lunch, Food Prep or Dinner?

Which day?

How often?

---

**Do you have a work group, church group, family group or others you might ask to sign up with you?**

---

**Would you like us to add you to our volunteer text list which communicates immediate needs in our kitchen schedule?**

Yes

No

---

Church and city, if you are attending at this time \_\_\_\_\_

Occupation \_\_\_\_\_ Employer \_\_\_\_\_

---

**References** - Please list 1 professional and 1 personal reference

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Company: \_\_\_\_\_ Relationship: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

How are you acquainted? \_\_\_\_\_ Relationship: \_\_\_\_\_

---

**Volunteer Experience**

Organization: \_\_\_\_\_ Volunteer Work : \_\_\_\_\_

Organization: \_\_\_\_\_ Volunteer Work : \_\_\_\_\_

---

**Names and birthdates of children under 18 who volunteer with you:**

- 
  
- 
  
-

---

## City Mission of Findlay Volunteer Policies

### I. Confidentiality

- a. No information about CM guests is to be given verbally or in writing to agencies or people outside the CM, and no pictures are to be taken of guests without a signed release from the CM and the guest involved.
- b. Volunteers are not permitted to disclose any form of information relating to our guests or to the business of the CM, even after their service ends.
- c. As part of your volunteer service, CM reserves the right the right to check your driving and/or criminal background and contact necessary references. This information will only be disclosed to necessary staff that impact your volunteer service.

### II. Conduct

Do not give the following to our CM Guests

- Rides
- Your contact information
- Clothing
- Cigarettes or Alcohol
- Gifts or Money
- Anything else not explicitly covered above

Dress Code

- Avoid open-toed shoes or sandals
- Avoid spaghetti straps or low-cut tops
- Avoid very short shorts
- With leggings, please wear a longer shirt that covers the seat
- Avoid clothing that has controversial printing or contains messages that are counter to CM values
- Wear clothes that you won't mind getting dirty if necessary

1. Do not consume alcohol, drugs, or any form of nicotine while on CM premises.
2. Avoid using your phone or other electronics while on duty, unless an emergency arises.
3. Act in a moral, ethical and mature manner and avoid any action/communication that will damage the reputation of CM.
4. Respect CM policies, established positions, and the decisions of authorized individuals within CM.
5. Respect all individuals within CM, including residents, volunteers, community members, and board members.
6. Avoid becoming romantically or emotionally involved with CM guests.
7. Avoid using language that would be regarded by reasonable people as offensive.
8. Avoid making statements to family, friends or media where you are speaking on behalf of CM.
9. Leave personal belongings such as purses, wallets, coats, electronics, etc. in your vehicle. We do not have storage space for them and are not responsible for any lost or stolen items that you bring into the CM.
10. Please follow the scheduled shift agreed upon between you and the Volunteer Coordinator
11. Please disclose any medical limitations you have, or medicine you are taking, that may impact you or your volunteer shift

### III. Your status as a volunteer

1. CM does not condone discrimination regarding race, color, national origin, religion, sex, sexuality, age, disability, or veteran status. This applies to all staff, volunteers, mission guests, board members, community members and any other party present in our organization. As a volunteer you are required to follow this policy as you interact with our guests.
2. You will not receive, by gift or by your own actions any compensation or goods for the services you provide.
3. By agreeing to volunteer, you give CM permission to take photos for electronic media, newsletters, and any other public relations activity.
4. As a volunteer, you will not be covered by any form of worker's compensation through CM. We will ensure safety precautions are being followed but as a volunteer you are accepting and understanding that there may be risks of injury, caused by yourself or someone else, while serving here. CM, its staff and other associated parties on premises are not liable for any injury or disease or economic loss or damage resulting from the actions or inactions of the Mission.
5. As a volunteer you are entering an at-will relationship and can be terminated from volunteering at any time by CM staff for any or no cause.
6. As a volunteer you are responsible for providing all requested information for yourself and any minor under your care in the form of a volunteer application and signature forms.

---

## Please initial then sign below:

### VOLUNTEER RELEASE OF RESPONSIBILITY \_\_\_\_\_

As a volunteer of the City Mission facility at 510 West Main Cross St, Findlay, OH, I recognize that I am on Mission property at my own risk. I agree to exercise safety precautions in the performance of duties and to refuse any jobs which I believe may present a personal risk to my health, safety, or well-being. I have the right to expect the City Mission to provide safe equipment for the tasks which I am asked to perform. I will not hold the Mission responsible for accidents that occur as a result of my volunteer service. I further agree to hold harmless from all liability the management and staff of the City Mission.

### VOLUNTEER CONFIDENTIALITY AGREEMENT \_\_\_\_\_

As volunteer of the City Mission of Findlay, OH, I understand that I will be working with confidential information. With respect to all guest's rights to have personal information safeguarded, I hereby pledge that I will hold all such information confidential NO INFORMATION (NAMES, ADDRESSES, CASE INFORMATION, ETC.) GAINED FROM AGENCY RECORDS SHALL BE REVEALED FOR ANY PURPOSE WHATSOEVER. I understand that any abuse of this pledge could result in termination of my volunteer position.

### ADULT/CHILD RESPONSIBILITIES \_\_\_\_\_

As a volunteer at the City Mission of Findlay, OH, I understand that any minors I bring to volunteer are fully my responsibility and I agree to hold harmless from all liability the management and staff of the City Mission. I further understand and agree to comply with the following requirements in regards to minors under my care. Minor must be:

School age minimum

Comfortable in a food service/kitchen environment

Able to take direction and complete tasks independently

Focused on tasks for duration of 2 ½ hour shift

Able to behave in reasonable and appropriate manor for duration of shift

I hereby state that all information I have supplied on this application is true to the best of my knowledge. I give the City Mission of Findlay permission to contact any of the references I have provided. I further give permission for a background or driving record check if my volunteer responsibilities require it. I have read the CM Guidelines and I agree to conduct myself according to them. I understand that these polices are in place for the safety of the volunteers, guests and staff of CM. If I am in violation of them, I understand that I can be dismissed from volunteer service for CM.

My handwritten or typed signature is considered a legal signature on this document.

**VOLUNTEER APPLICANT SIGNATURE:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PARENT SIGNATURE (If under 18 years old):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**CITY MISSION STAFF SIGNATURE** \_\_\_\_\_ **Date:** \_\_\_\_\_