



Neighborhood House

Helping Neighbors Help Themselves

Providing services and resources to develop, support and foster self-reliance, economic independence and dignity in people of all ages and backgrounds.

For Office Use Only

NH staff receiving information form:

Site: _____

Background check completed by: _____
Date: ___/___/___

Date of database entry: ___/___/___

Volunteer Application

(Please print clearly!)

Name: _____ Date: _____
 First Middle Last

Mailing address: _____
 Street City Zip

Telephone(s): _____ (Home) _____ (Business)
 _____ (Cell)

E-mail: _____

I am over 18-years of age Yes No

Occupation: _____ Employer: _____

Does your employer offer an employer-sponsored volunteer program? Yes No

Are you fulfilling a school requirement of community service, practicum or internship through volunteer service at Neighborhood House? Yes No

I learned about NH volunteer opportunities from (be specific!): _____

I would like to receive Neighborhood House publications in the mail: Yes No

I would like to receive Neighborhood House information by e-mail: Yes No

EMERGENCY CONTACT INFORMATION

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____

AVAILABILITY

- Regular basis
- One-time project/event
- Flexible

NOTE: Please keep in mind that weekend opportunities are very limited.

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.
Morning							
Afternoon							
Evening							

SKILLS

- | | | |
|--|--|---|
| <ul style="list-style-type: none"> <input type="checkbox"/> Data entry <input type="checkbox"/> Driving <input type="checkbox"/> Filing <input type="checkbox"/> Language Fluency:
_____ <input type="checkbox"/> Organizing <input type="checkbox"/> Receptionist <input type="checkbox"/> Word Processing | <ul style="list-style-type: none"> <input type="checkbox"/> Marketing <input type="checkbox"/> Graphic Design <input type="checkbox"/> Childcare <input type="checkbox"/> Coaching
Sport: _____ <input type="checkbox"/> Teaching
Subject: _____ <input type="checkbox"/> Tutoring | <ul style="list-style-type: none"> <input type="checkbox"/> Crafts <input type="checkbox"/> Drawing <input type="checkbox"/> Graphic art <input type="checkbox"/> Painting <input type="checkbox"/> Communications <input type="checkbox"/> Photography <input type="checkbox"/> Grant Writing |
|--|--|---|

INTERESTS & PREFERENCES

- | | | |
|--|---|--|
| <p>What population would you like to serve?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Children (ages 0-5) <input type="checkbox"/> Youth (ages 6-18) <input type="checkbox"/> Adults <input type="checkbox"/> Seniors <input type="checkbox"/> Families | <p>Program Interest:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Parenting Program <input type="checkbox"/> Head Start <input type="checkbox"/> Youth & Family Services (SUN School) <input type="checkbox"/> Community Services (Food Box) <input type="checkbox"/> Aging Services/Senior Center <input type="checkbox"/> Not sure | <p>What kind of work interests you?</p> <ul style="list-style-type: none"> <input type="checkbox"/> Sedentary work <input type="checkbox"/> Physical work <input type="checkbox"/> Outdoor work <input type="checkbox"/> Indoor work <input type="checkbox"/> Gardening |
|--|---|--|

Volunteers in the Emergency Food Box Program may be asked to lift and move 20-50 lbs. and climb 15-20 stairs during their volunteer service. Are you aware of any limitations that would hinder your ability to lift 20-50 lbs. or repeatedly climb 15-20 stairs? Yes No

Thanks for your interest in Neighborhood House!

Questions: call 503-246-1663 x 2117

FAX 503-245-2819; e-mail volunteers@nhweb.org

7780 SW Capitol Hwy, Portland, OR 97219

Declaration of Client Confidentiality

I understand that all information about clients, including their names, is confidential client information. Under no circumstances will I disclose or discuss any client information with individuals not affiliated with Neighborhood House, Inc. I understand that client information should be shared with Neighborhood House staff only to the extent necessary to effect services for that client. I further understand that disclosure of information about clients is allowed in summaries, statistical reports, or other forms, which do not identify particular individuals.

Signature

Date

Photo Release

I do ___ / do not ___ grant Neighborhood House, Inc. permission to interview me and/or to publish photographs taken of me, and my name, for use in publicity materials. Publicity materials include, but are not limited to, news releases, publications, videos and web use.

Signature

Date

Volunteer Insurance Coverage

I understand that while acting as a volunteer at Neighborhood House, I am covered for liability for bodily injury and property damage caused to others. If I am hurt, I am responsible for my own medical care. I am not covered by Worker’s Compensation insurance.

Signature

Date

Acknowledgement of Receiving Volunteer Manual

I have received and read the Volunteer Handbook of Neighborhood House, and I have had the opportunity to discuss any of the provisions which I believed needed clarification. I agree to comply with the policies and procedures contained in this Handbook, and in particular, the prohibition against the unlawful manufacture, distribution, dispensation, possession and use of alcohol, drugs and other controlled substances while on Neighborhood House property, or while performing assigned duties off the property. I understand that this Handbook is intended to be a general description of the current policies and procedures related to my volunteer duties, and that it may become necessary for Neighborhood House to change the policies and procedures described in this Handbook from time to time. I also understand that Neighborhood House reserves the right to make the changes without prior notice to me, but that when changes are made, Neighborhood House will make every effort to promptly notify me of the changes.

Signature

Date

Neighborhood House Business and Personal Vehicle Usage by Volunteers

Many volunteers drive agency owned vehicles as part of their volunteer activities or may be using their own vehicles by request of the agency. If they have a negligent accident a lawsuit could name both the business and the volunteer. The agency's vehicle liability insurance is designed to protect the agency and under many circumstances it will cover the volunteer, too. On the other hand, there are situations when a volunteer might not be covered.

Be aware of the following if the volunteer is operating a vehicle as part of their volunteer activities and has a negligent accident:

WITHIN THE SCOPE OF THE VOLUNTEER ACTIVITIES:

If in an agency owned and insured vehicle, the insurance policy for the agency would give protection to the agency and the volunteer.

If operating their own vehicle, the agency and the volunteer would first be covered by the volunteer's insurance. For amount in excess of the volunteer's liability coverage limit, the agency's insurance would protect only the agency.

***No coverage is provided under the agency's insurance policy for damage to the volunteer's vehicle.**

OUTSIDE THE SCOPE OF THE VOLUNTEER ACTIVITIES:

If in an agency owned vehicle, the agency's insurance policy would only protect the agency.

If in their personally owned vehicle, the volunteer would only have protection under their own insurance policy.

***No coverage is provided under the agency's insurance policy for damage to the volunteer's vehicle.**

Those volunteers with such poor driving records that they have been disallowed from using agency vehicles are not to use their personal vehicles to perform any work on behalf of the agency.

Volunteers are encouraged to contact their personal insurance company to let them know they drive as part of their volunteer activities. An endorsement is usually available to extend liability coverage for the use of a vehicle they don't own that is used on a regular and frequent basis. Their insurance company should be aware if they drive their own vehicle during their volunteer activities. It is advised that volunteers using their personal vehicles for volunteer activities assume a minimum limit of liability protection of \$500,000.

Volunteer drivers are required to provide proof of personal automobile insurance coverage prior to engaging in volunteer activities requiring driving. Use of a volunteer's personal vehicle should not be permitted whenever possible. If they must be used for business purposes, the driver is subject to the same driving record scrutiny as volunteers driving vehicles owned and insured by the agency.

Under no circumstances is a volunteer to operate and agency owned vehicle outside the scope of the volunteer activities or for personal purposes. Volunteers should not transport agency clients in their personal vehicles.*

**Under specifically approved circumstances, due to Neighborhood House's contract with Ride Connection and its mentoring program, volunteers are permitted to transport clients in the volunteer's personally owned vehicle.*

I have received and read the above policy regarding business and personal vehicle usage. I have had the opportunity to discuss any of the provisions which I believed needed clarification and understand the agency reserves the right to make any changes without prior notice to me, but when changes are made, the agency will make every effort to promptly notify me of the changes.

Signature

Date

NOTICE AND ACKNOWLEDGMENT

Notice Regarding Background Investigation

Neighborhood House may obtain information about you from a consumer reporting agency for employment or volunteer purposes. Thus, you may be the subject of a “consumer report” and/or an “investigative consumer report” which may include information about your character, general reputation, personal characteristics and/or mode of living and which can involve personal interviews with sources such as your neighbors, friends or associates. These reports may be obtained at any time after receipt of your authorization and, if you are hired or accepted as a volunteer, throughout your employment and/or time of service. You have the right, upon written request made within a reasonable time after receipt of the notice, to request disclosure of the nature and scope of any investigative consumer report. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment or volunteering is an investigation into your education and/or employment/volunteer history conducted by OPENonline, LLC, PO Box 549 Columbus, OH 43216 888-381-5656 or another outside organization. The scope of this notice and authorization is all encompassing, however, allowing Neighborhood House to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and, if you are hired or accepted as a volunteer, throughout the course of your employment or service to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

Use of date of birth is for identification purposes only. Neighborhood House is an equal opportunity employer. Prospective employees will receive consideration without discrimination based on race, creed, color, sex, age, national origin, handicap, veteran status or any other protected class.

Acknowledgement and Authorization

I acknowledge receipt of the "Notice Regarding Background Investigation" and a "Summary of Your Rights" under the Fair Credit Reporting Act and certify I have read and understand both of those documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" at any time after receipt of this authorization and, if I am hired or accepted as a volunteer, throughout my employment and/or time of service. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish all background information requested by OPENonline LLC, another outside organization acting on behalf of Neighborhood House and/or Neighborhood Hues itself. I agree that a facsimile (fax) or photographic copy of this authorization shall be as valid as the original.

Full Legal Name: _____
 First Middle Last

Birth Name: _____
 First Middle Last

All Other Names Used: _____

Address: _____
 Street City State Zip

Date of Birth: _____ SSN: _____

Driver's License Number: _____ State: _____ Issue date: _____

List all state and counties you have resided in and during what years:

Criminal Records Disclosure

Neighborhood House routinely requests volunteers permit a criminal history background check as a condition of volunteer participation. Have you ever been convicted of a crime involving child abuse, sexual abuse, neglect, elder abuse, or identity theft or any violent felony? Conviction of a crime does not necessarily disqualify an applicant from volunteer opportunities.

Yes _____ No _____

If so, please explain: _____

Signature

Date

Para informacion en espanol, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. For more information, including information about additional rights, go to www.consumerfinance.gov/learn more or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identity theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

• **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

• **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

• **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

• **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

• **You may limit “prescreened” offers of credit and insurance you get based on information in your credit report.** Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.

• **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

• **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:

1.a. Banks, savings associations, and credit unions with total assets of over \$10 billion and their affiliates.

b. Such affiliates that are not banks, savings associations, or credit also should list, in addition to the Bureau:

2. To the extent not included in item 1 above:

a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks

b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and insured state branches of foreign banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act

c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations

d. Federal Credit Unions

3. Air carriers

4. Creditors Subject to Surface Transportation Board

5. Creditors Subject to Packers and Stockyards Act

6. Small Business Investment Companies

7. Brokers and Dealers

8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations

9. Retailers, Finance Companies, and All Other Creditors Not Listed Above

CONTACT:

a. Bureau of consumer Financial Protection
1700 G Street NW
Washington, DC 20552

b. Federal Trade Commission: Consumer Response Center – FCRA
Washington, DC 20580
(877) 382-4357

a. Office of the Comptroller of the Currency
Customer Assistance Group
1301 McKinney Street, Suite 3450
Houston, TX 77010-9050

b. Federal Reserve Consumer Help Center
P.O. Box 1200
Minneapolis, MN 55480

c. FDIC Consumer Response Center
1100 Walnut Street, Box #11
Kansas City, MO 64106

d. National Credit Union Administration
Office of Consumer Protection (OCP)
Division of Consumer Compliance and Outreach (DCCO)

1775 Duke Street
Alexandria, VA 22314
Asst. General Counsel for Aviation Enforcement & Proceedings
Department of Transportation
400 Seventh Street SW
Washington, DC 20590

Office of Proceedings, Surface Transportation Board
Department of Transportation
1925 K Street NW
Washington, DC 20423

Nearest Packers and Stockyards Administration area supervisor

Associate Deputy Administrator for Capital Access
United States Small Business Administration

403 Third Street, SW, 8th Floor
Washington, DC 20416

Farm Credit Administration
1501 Farm Credit Drive
McLean, VA 22102-5090

FTC Regional Office for region in which the creditor operates or
Federal Trade Commission: Consumer Response Center – FCRA
Washington, DC 20580
(877) 382-4357