



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

<b>For Office Use Only</b>
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/information in the mail:  Yes  No

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

## INTERESTS & PREFERENCES

What population would you like to serve?

- Children (ages 0-5)
- Youth (ages 6-18)
- Adults
- Seniors
- Families

Program Interest:

- Parenting Program
- Head Start
- Youth & Family Services
- Food Pantry
- Senior Center
- Administration Committee Work
- Not sure

What kind of work interests you?

- Sedentary work
- Physical work
- Outdoor work
- Indoor work
- 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 2118

FAX 503-245-2819; e-mail [volunteer@nhpdx.org](mailto:volunteer@nhpdx.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