



RAVE – I/M, Inc. Volunteer Application

The sensitive nature of our work necessitates that we ask questions of a personal nature. We also need this information in order to make appropriate job assignments so that you will enjoy your work with us and we can accommodate any special needs or concerns that you may have. All information on this application is confidential.

CONTACT INFORMATION

NAME: _____ DATE: _____

ADDRESS: _____
STREET CITY STATE ZIP

EMAIL ADDRESS: _____ DOB: _____

PHONE: Cell: _____
Home: _____ OVER 18 YEARS OF AGE: Yes No

EDUCATION/EXPERIENCE

HIGHEST LEVEL OF EDUCATION COMPLETED: _____

OCCUPATION: _____

LANGUAGE OTHER THAN ENGLISH: WRITTEN _____ SPOKEN _____

Any previous volunteer/work experience with domestic violence or sexual assault? Yes No

If yes, where did you volunteer/work and what did you do? _____

Have you been a client of RAVE or any other domestic or sexual abuse program within the past year?
 Yes No

INTERESTS/AVAILABILITY

When are you available to volunteer? Weekdays Weeknights Weekends

What is your volunteer commitment level? Once Weekly Monthly Other

When is a convenient time for training sessions? Weekdays Weeknights Weekends

Long-term, direct care volunteer opportunities require 30-40 hours of training are required. Are you able to meet this requirement? Yes No Not applicable to my interests

How did you learn about RAVE? _____

What kind of interests and skills do you have? (Please check all that apply)

- Health/Wellness/Fitness
- Cooking/Baking
- Cosmetology
- Research and Analysis
- Legal/Financial Issues
- Fundraising
- Entertainment (i.e., singing)
- Creativity/Crafting
- Public Relations (i.e., public speaking/awareness, leading discussions/groups)
- Other/Please Specify _____

What types of volunteering are you interested in doing for RAVE? (Please check all that apply)

- Crisis Line/Shelter Assistance
- Transportation
- Fundraising/Donations
- Domestic Assault Response Advocate (DARA)
- Child Care
- Maintenance/Up Keep (Indoor/Outdoor)
- Shelter Group Activities – Adult and/or Child (craft, writing workshop, games, sports, cooking, stress relief, exercise/yoga etc.)
- Spreading Awareness (tabling, passing out flyers etc)
- Educating/Skill Building (ex: taxes, gardening, job search, cooking, professionalism, nutrition, exercise, wellness etc.)
- Safe House Cleaning/Organizing/Décor

Is there an opportunity you're interested in but did not see on this survey? If so, please list these below. We are always looking for new ideas and skills!

In order to ensure volunteers' safety and health, we need to know if there are any concerns that may affect your work:

By law, we must ask, have you ever been convicted, pled no contest or guilty to a crime?

Yes **No**

Do you have reliable transportation? **Yes** **No**

Do you have a valid driver's license or state ID card? **Yes** **No**

(You will need to supply RAVE with a copy.)

Do you have the minimum amount of auto insurance required by law? **Yes** **No**

(You will need to supply RAVE with a copy of your "proof of insurance.")

Please Read: I give Relief After Violent Encounter (RAVE) permission to check my criminal history and Motor Vehicle Record with the Michigan State Police. I understand that RAVE will conduct a thorough investigation into my suitability for the applied volunteer position.

NOTE: A criminal record will not necessarily disqualify an applicant. A criminal record is one piece of information that will be considered in determining the appropriateness of an individual to be a RAVE volunteer.

Applicant's Signature Race Date of Birth Social Security No. Driver's License No.

There is no right or wrong answers to questions 1 – 5. Please answer them briefly and honestly. We would like to know your thoughts and opinions on these issues.

- 1. Why do you want to be a volunteer for our program? _____

- 2. How do you think a woman feels that has just come to the shelter? _____

- 3. Why do you think a victim stays in an abusive relationship? _____

- 4. Why do you think someone resorts to violence? _____

- 5. What does empowerment mean to you? _____

Comments/Concerns/Other: _____

PLEASE SUBMIT THIS FORM USING ONE OF THE FOLLOWING OPTIONS

<u>Email</u>	<u>Mail</u>	<u>Drop Off</u>
Claire Hopkins Volunteer Coordinator claireh@raveim.org	RAVE – Ionia/Montcalm, Inc., P.O. Box 93 Ionia, MI 48846	RAVE – Ionia/Montcalm Inc., 850 E. Lincoln Ave. Ionia, MI 48846

RAVE-I/M, Inc.

Volunteer Coordinator: 616-225-1995 | **DARA Coordinator:** 616-527-3351 ext. 225

Administrative Office: 616-527-3351

Crisis: 1-800-720-7233 (SAFE)

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