

VOLUNTEER APPLICATION

Thank you for your interest in serving with Hope United! Please return the completed application to: Tyler's Redemption Place – 2684 Sanitarium Road, Akron, Ohio 44312

We have a variety of opportunities to bring hope and healing to those seeking encouragement, support, and wellness. As you embrace the mission of Hope United, many will be affected by your heartfelt efforts. We appreciate your interest and active participation in recognizing that *Recovery Happens Together*!

Upon completion of this application, you will be contacted by one of the Hope United team to set up an orientation and discuss further training for your role. All information will be kept confidential and will help us to connect you with the appropriate volunteer position that suits your interest and skills. Thank you!

First And Last Name:				
Address:				
City:	State:		Zip:	
Primary Phone:	Email:			
EMERGENCY CONTACT INF	ORMATION			
Name:				
Relationship to Volunteer: _				
Phone Number:				
Please be specific.	ents, skills, experience, or int	-		-
	e: MON. TUE. WED. T			
Times Available: From	to			
Morning Afterno	on Evening			



VOLUNTEER AREAS OF INTEREST Please check all areas where you are interested in serving:

- ____ Greeter
- ____ Cleaning Helper
- _____ Baking/Cooking/Donating Food
- ____ Laundry Helper
- ____ Serve at Special Events
- ____ Clerical Duties
- ____ Jack of All Trades
- ____ Organizer
- ____ Grounds Work
- _____ Anchored in Hope Prayer Team
- _____ Securing Donations
- _____ Leading a Group
- _____ Fundraising Assistance
- _____ Represent Hope United at Community Events
- _____ Volunteer at Annual Golf Outing
- _____ I have read the materials in the volunteer packet
- I am familiar with safety procedures at Tyler's Redemption Place (location of Narcan, fire extinguishers, AED kit, etc.)
- _____I signed the confidentiality agreement
- _____I signed the code of conduct

PRINT NAME: _____

SIGNATURE: _____

DATE: _____



Confidentiality Agreement

During the course of your activities with Hope United, you may have access to information of a confidential nature. This could be as simple as hearing what a group member shares during a support group meeting, or seeing someone you know at a support group meeting or another activity.

When someone gives us any confidential information, they need to be sure that we will not pass this to anyone else without their permission.

The only exception to this is if you have been party to any information which raises a concern for safety, such as a child protection issue or if someone threatens to injure themselves or others. In this case you will be expected to share this with the Executive Director.

Confidentiality Statement

I understand that while volunteering/working with Hope United I may come across information that is confidential. I agree that I will never disclose such confidential information to anyone outside of Hope United.

Signed	
Print Name	
Date	



VOLUNTEER CODE OF CONDUCT

As a volunteer with Hope United/Tyler's Redemption Place, you are expected to maintain ethical and professional conduct while on our premises, during volunteer shifts or activities, and/or when representing our organization in the community.

This Volunteer Code of Conduct aims to clearly communicate the required standards of behavior while volunteering with Hope United/Tyler's Redemption Place. We expect our volunteers to act respectfully, honestly, and ethically while fulfilling their responsibilities, and in their interactions with our staff, fellow volunteers, and community members.

By signing this Volunteer Code of Conduct, I indicate that I have read, understood, and agree to uphold and abide by the outlined statements in the Volunteer Policies and Procedures document. I also agree to accept the consequences as a result of not following Volunteer Policies and Procedures.

Signature of Volunteer _____

Date	
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