

APPLICATION FOR VOLUNTEER SERVICE

 $\begin{array}{ccc} \underline{For\ Office\ Use} \\ BC\ \Box & DB\ \Box & OR\ \Box \\ \end{array}$

Program: Site: Start Date:

End Date:

Please complete all sections to the best of your ability

Section 1 – PERSONAL INFORMATION						
FULL Name: Today's Date:						
Permanent Mailing Address: Primary Phone:						
Email: Preferred Contact Method:						
Preferred Contact Method: Birth Date://						
Have you ever volunteered or been employed by The Portland Housing Authority?						
Yes: When and where?						
☐ No: How did you hear about us?						
□ VolunteerMaine □ VolunteerMatch □ Idealist □ Craigslist □ PHA Website □ USM □ Bowdoin □ UNE □ St. Joseph's □ SMCC □ Friend □ Co-worker □ Family □ Other: □						
Have you ever been convicted of a felony? Yes No						
If yes, please explain:						
Note: A conviction will not automatically bar participation in PHA Programming but will be considered within the context of the entire application.						
Section 2 – EMERGENCY CONTACT						
Name: Relationship:						
Phone: Alternate phone:						
Section 3 – RELEVANT EXPERIENCE						
Please list any relevant work experience including dates and responsibilities:						
Please list your prior volunteer experiences including dates and responsibilities:						

		Section 4 –	VOLUNTEER	INTER	EST				
What are your goals for your service with us? What would you like to get out of your experience?									
Please indicate the type of volunteer placement you are seeking: Ongoing service with direct resident contact									
Ongoing service with direct resident contact Ongoing service without direct resident contact									
☐ Intermittent or one-time service with direct resident contact									
 ☐ Intermittent or one-time service without direct resident contact ☐ Casual resident contact in a community setting i.e., resident may be a member of a larger group 									
in the community involved in an activity									
Please indicat	e the population	on you would m	ost enjoy volur	iteering v	vith:				
			Middle School						
		_	☐ Elderly/Disa] Staff		
			ages spoken th to complete the						
	sing Authority	(you may wish	to complete the	skiiis an	u mei	esi ussessmeni	on page 3).		
Are you willin	ng to transport	our residents in	n PHA vehicles	? 🗌 Ye	s 🔲 l	NO This is not	required of any voluntee		
What is your	ransportation	situation?							
		Section	n 5 – AVAILA	BILITY					
No. of Hours:			Length of c	ommitme	ent (pl	ease check all	that apply):		
per [Month W	eek	Unst	ıre					
Specific Progr					_	mber-December/J (September-June			
☐ Study C☐ CHEET.		ımmer Soccer ımmer Lunch		mer (June	•	_	=)		
Art Prog		ther:		e than on	•				
Personal	Finance		_			oject: ho			
Days and time	es available:		Pr	otessor:					
Monday	Tuesday	Wednesday	Thursday	Frida	ay	Saturday	Sunday		
		Section 6 – A	APPLICANT S	STATEN	1ENT				
			and complete to						
			this application at this applicat						
			s volunteer prog						
	d Housing Au		1 6				1		
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Signature:				Da	ite:				

Section 7 – CONFIDENTIALITY STATEMENT

Information regarding any applicant, participant, or anyone otherwise connected with the programs of the Portland Housing Authority is to be kept confidential. Information will be known only by those employees and volunteer workers who, by the nature of their job responsibilities, need such information. Information includes the fact that a person is an applicant or tenant receives subsidy, etc.

Whenever an employee or volunteer is in an apartment, on a housing site, or otherwise on Housing Authority property and/or on the job, anything that is seen or heard is to be kept in confidence, and only related to other employees having relevant job responsibilities.

Applicants, participants, or tenants are not to be discussed with other applicants, participants, or tenants except as required by job responsibilities and due diligence is taken to protect confidentiality.

Any breach of confidence by an employee or volunteer is grounds for dismissal from service, and other penalties may apply.

Additionally, there are state and federal laws which apply to the keeping of confidential information which have monetary and other penalties which may apply.

I have been given a copy of this statement and fully understand this policy and agree to abide with its requirements.

Signature: Date:

Section 8 – AGREEMENT AND RELEASE FROM LIABILITY

Diversity

Volunteers are asked to respect the diversity of our learners and other volunteers by refraining from verbal or personal acts of discrimination against anyone on the basis of gender, race, color, ancestry, national origin, religious belief, age, familial status, disability, veteran status, or sexual orientation.

Volunteer Record

Volunteer applications are kept confidential and used for the purposes of Portland Housing Authority only. Personally identifiable information is not sold or shared with others except as required by law.

Safety and Liability

All volunteers are responsible for their own safety in fulfilling their volunteer commitment. Should a safety incident arise, it should be reported immediately to a staff member.

Voluntary Participation

I acknowledge that I have voluntarily applied to assist Portland Housing Authority in it's important work providing programming to local residents who are in need. I understand that as a volunteer I will not be paid for my services, that I will not be covered by any medical or other insurance coverage provided by Portland Housing Authority, and that I will not be eligible for any Workmen's Compensation benefits.

Release

In consideration of the opportunity afforded me to assist Portland Housing Authority, I hereby agree that I, my assignees, heirs, guardians, and legal representatives, will not make a claim against Portland Housing Authority, or either of their officers, directors and employees (collectively "Releasees"), collectively or individually, or any of the volunteers, for the injury or death to me or damage to my property arising from my participation. Without limiting the generality of the foregoing, I hereby waive and release any rights, actions, or causes of action resulting in personal injury or death to me, or damage to my property, sustained in connection with my participation in Portland Housing Authority programs, and excepting only such loss, damage or injury as may be caused by the sole negligence of any Release.

I acknowledge that I have carefully read these terms of my volunteer service, fully understand their content, and am aware that this is a release of liability and a contract between myself and Portland Housing Authority. By SIGNING BELOW, I accept and agree to the terms contained above.

Cianatura	Data
Signature:	Date:

The Portland Housing Authority does not discriminate in providing services or the opportunity to volunteer services, or in the provision of employment opportunities on the basis of race, color, religion, national origin, sexual orientation, citizenship, gender, age, disability, and/or other characteristics prohibited by state or federal law (except where such constitutes a bona fide qualification permitted by law)

Forms should be printed and signed then returned by mail, email, or delivered to:

Emily Mancini-Fitch efitch@porthouse.org

Portland Housing Authority 14 Baxter Boulevard Portland, ME 04101

Phone (207) 221-8063

Section 9 – SKILLS & EXPERIENCE (OPTIONAL) Please check areas in which you have skills or experience.

		<u>Leadership</u>		<u>Lang</u> ı	<u>uages</u>		
Teaching Tutoring		☐ Strategic Planning			☐ American Sign Language		
Preschool	G 1 1	☐ Fundraising			☐ Spanish		
Elementary		☐ Board Mer	nbership	☐ Fre	French		
☐ ☐ Middle Sch		☐ Advocacy		☐ So	Somali		
High Schoo		Program D	evelopment	Ca	Cambodian/Khmer		
☐ ☐ Special Nee		Grant Writ	ing	☐ Vietnamese			
Eng. Langu	age Learners	earners Special Event Planning			Arabic		
☐ ☐ GED		Law	8		ıer		
Adults age 30-50		Finance		Other:			
Adults age 5	50-80						
Art & Culture	Recreation	<u> </u>	Communicat	tions	Other		
☐ Theatre	Camp Coun	selor	☐ Advertisir	ng	Child Care		
Fine Arts:	Coach	-		Design	Food Service		
Music —	Sports:	— ·		Speaking Culinary Arts			
Photography			Writing	1 5 1 5			
Film	☐ Yoga/Zumb	Yoga/Zumba/Pilates [lations	☐ Medical		
☐ Other:		Other:		7			
Information Technology		Office Skills		Social W	/ork		
Database Management		Bookkeep		Disab			
Hardware Support		Data Entry			Children & Families		
System/Network Support	rt	Filing			Geriatric/Senior Care		
Website Development/		—			Mental Health		
Social Media	viaintenance	Word Processing		Substance Abuse			
Blogging		Word Processing		Domestic Violence/Assault			
Blogging					estic violence/14ssaurt		
S	ection 10 – INT	EREST ASSI	ESMENT (OP	TIONAL)			
Section 10 – INTEREST ASSESMENT (OPTIONAL) Please check all areas in which you have an interest in volunteering. The following apply to programming offered by the PHA and its							
Please check all areas in which yo	u have an interest in	n volunteering. Th	he following apply	to programi	ming offered by the PHA and its		
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