



# FY 2018-2019 Volunteer Application

**Circle Program of Interest:** The Link      Bridges      HomeAid Family CareCenter      Play Hour Attendant  
Costa Mesa Shelter      Santa Ana Armory      Fullerton Armory      Ontario Access Center      Other: \_\_\_\_\_

Application Date: \_\_\_\_\_ Date of Birth (required for background check): \_\_\_\_\_

Volunteer Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Preferred Phone Number: \_\_\_\_\_ cell - home (please circle)

Email Address (for online volunteer account): \_\_\_\_\_

### EMERGENCY CONTACT INFORMATION:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Cell: \_\_\_\_\_ Other: \_\_\_\_\_

**Medical conditions / Medications we should be aware of in case of emergency:** (Mercy House is not liable or accountable for medical emergencies): \_\_\_\_\_

### Liability Release

In making this application to volunteer my services. I understand that I will assume all risks of injury occurring to me while on the premises of any of your facilities, or any injury to me while rendering voluntary services to a client and/ or Mercy house. Since I am not an employee of this program, I understand I am not covered by Workman's Compensation. I further agree that if any services involve transportation of person, I will carry adequate liability insurance on my automobile and release Mercy House of any liabilities in case of an accident. It is also my understanding that a routine criminal background check may be conducted on volunteers and the results would be held confidential. It is not routine for volunteers to give out personal information such as home address and telephone. If I chose to do so, Mercy House will not be held liable for any problems that may arise as a result of doing so.

### Access and Confidentiality Agreement

I agree not to divulge any information to any person in regard to clients obtained in the course of my association with Mercy House. I further agree not to publish, and generally not to make public any personal information regarding persons who have received services that would enable identification of individuals.

I recognize that unauthorized release of confidential information may make me subject to a civil action under the provisions of the California Welfare and Institutions Code.

I understand the expectations to client rights to confidentiality as mandated by law in the following instances:

- a) If the client threatens great bodily harm or death to another person or him/herself
- b) If a court of law issues a legitimate subpoena
- c) If child abuse, sexual abuse, physical abuse, emotional abuse or neglect of a minor

**I HEREBY READ, ACKNOWLEDGE MY UNDERSTANDING AND AGREE WITH THE STATEMENTS ABOVE IN THE LIABILITY RELEASE AND ACCESS AND CONFIDENTIALITY AGREEMENT. I ALSO UNDERSTAND THAT MERCY HOUSE RESERVES THE RIGHT TO DECLINE OR TERMINATE A VOLUNTEER AT ANY TIME.**

**Volunteer's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### Parental Consent ( If under 18 years of age)

I have read, understand, and have signed the contingent agreements presented to my son/daughter that will enable him/her to volunteer at Mercy House. I understand that the safety of the residents, staff, and volunteers at Mercy House is of primary importance and I will not jeopardize that safety through any intent of my own and I will immediately notify a staff member of any situation or person that poses a threat to safety.

I understand that as the parent of a volunteer either the Volunteer Coordinator or another staff member will answer any questions or concerns that I may have promptly. I further understand that my son/daughter's commitment to Mercy House is a serious one and I have knowledge of the time commitment made by my son/daughter and hereby give my permission for him/her to participate as a volunteer. I understand as the parent of the volunteer that I will be present for my son/ daughter's volunteer commitment.

Parent/Guardian Name: \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Each volunteer must maintain a firm commitment to professional conduct

As a volunteer of Mercy House volunteers are expected to maintain the highest level of moral, ethical and professional conduct while at the agency site. Volunteers will not engage in verbal abuse of sexual nature, jokes and stories of a sexual nature, and or any type of sexual interaction, with a Mercy House client or staff.

## Relationships with Clients

Volunteers are prohibited from developing dual relationships with any client they meet through their volunteer involvement at Mercy House. Examples of dual relationships include (but are not limited to) a volunteer entering into a business, romantic, or sexual relationship with a client. Soliciting clients for your business is strictly prohibited. Mercy House volunteers are not allowed to be named as having authority to make decisions for a client under any type of power of attorney or other legal procedure. This includes, but is not limited to, powers of attorney for medical care or finances. Volunteers matched with Mercy House clients through Mercy House are not allowed to assume responsibility for custodianship or guardianship issues for any client or for a member of the client's family.

## Food & Other Substances

Volunteers will not consume any food items or drinks supplied by Mercy House while volunteering. Food and drinks are purchased solely for the consumption by our homeless clients. Volunteers must also commit to not consuming any type of illicit drugs on Mercy House premises while volunteering on behalf of this agency.

## Discrimination

Volunteers will not judge any individual's race, disability, religious preference, sexual orientation, color, age, veteran status, citizenship, ancestry, national origin or gender.

## Religious Conviction

Mercy House does not condone the recruitment of its clients for religious intent.

## Volunteer Boundaries

Volunteers are not permitted to loan or give money to clients, should not meet with clients outside of the Mercy House Shelters without permission from program staff, and are not allowed to drive clients in their vehicles.

## Commitment

Mercy House relies heavily on our volunteers, therefore, we take your commitment very seriously. If you sign-up for a shift and miss your shift without removing yourself from the calendar or do not give at least a 2 day notice you may be removed from any future shifts after the second offense.

## Age Restrictions

The program you are signing up to volunteer at can be a volatile environment and we do not permit anyone who is homeless or men and women with criminal offenses to volunteer. Minimum age requirements:

- Bridges at Kraemer Place, Santa Ana Armory, Fullerton Armory, Santa Ana The LINK, Ontario Access Center and HomeAid Family Care Center - 13 years of age with at least one adult for every three minors.
- Regina House Play Hour Attendant – 16 years of age or older with a parent/guardian signed up to serve or 18 years of age or older with a Live Scan

**I hereby agree to the following terms and conditions of being a Mercy House volunteer. I understand that failure to adhere to these conditions may result in my being dismissed from the Mercy House Volunteer Program. I also consent to a background check to ensure that I have no open warrants, no violent felonies, and that I am not a registered sex offender.**

**Volunteer Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Photo Release

I hereby release, authorize, and give full consent to Mercy House Living Centers to publish and display my information as well as any photographs in which I, spouse, and/or children appear. I further agree that Mercy House Living Centers may use or cause to be used such material for, or in, visual displays, any exhibitions, internet web pages, or publication for the purpose of communication to non-profit, charitable partners of Mercy House Living Centers and the general public, provided that Mercy House Living Centers is credited with such materials and is used or printed. I also acknowledge that I have received no monetary compensation for materials used pursuant to this release. I also declare by my signature below, that this testimony is factual and accurate.

I check this box consenting to having my photo used.

**Personal Experience (optional)**

Please use these questions as a guide to describe your life experiences relative to volunteering at Mercy House. You may add any additional information about yourself that you would like us to know. Please print clearly.

1. Why would you like to volunteer at Mercy House?

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2. I bring the following work/volunteer experience and skills:

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3. How did you hear about Mercy House?

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4. Other than English, please indicate any language(s) you speak fluently.

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**Reference (optional)**

Reference Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Would you like to be a volunteer translator?  Yes  No  N/A

**ADDITIONAL INTERESTS (optional)**

Interested in fundraising opportunities or on how to host a drive?

Yes  No

Would you like more information on how to involve your business, church or coworkers?

Yes  No

Would you like to volunteer with Mercy House mailings? (Select dates, business hours only).

Yes  No

Do you have a professional skill or talent that you would like to offer Mercy House?

(Photography, writing, marketing, graphic designing, etc.).

Yes  No

**Thank you for your interest in volunteering with Mercy House!**