



# VOLUNTEER APPLICATION

For Office Use Only

Date Received:

Accepted

Date Interviewed:

Denied

Position:

Reason:

NOTE: A 36-hour training, which REACH Beyond Domestic Violence provides, is required of anyone volunteering/interning directly with survivors/survivor records, or providing community education for REACH. A 6-hour training, which REACH Beyond Domestic Violence provides, is required of all other volunteers/interns.

### Purpose of Application (Please Check One)

To volunteer with REACH Beyond Domestic Violence (must be able to commit to 1 year)

To intern (must be able to give a minimum of 8 hrs/week for a minimum of 1 academic year)

### Name

(Last )

(First)

(Middle)

### Address

(Street)

(City)

(State)

(Zip code)

### Phone numbers

(Home)

(Work)

(Cell)

### E-mail

Social Security Number \_\_\_\_\_ Date of Birth

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

If you are currently employed, please complete the following:

(Profession)

(Employer)

Please return to Joanne Patterson via fax (781.891.3861) or mail (P.O. Box 540024, Waltham MA 02454). You may also request an electronic copy of this application by emailing jo@reachma.org.



**If you are currently in school, please complete the following:**

(School)

(Major/Degree)

**Program Interests**

If you have previously applied as a volunteer/intern, please check here.

Date of last application \_\_\_\_\_

**Volunteer assignments**

Which volunteer assignments are you interested in? Please check all that apply. See *volunteer application packet for volunteer assignment details.*

- Residential Program
- Legal Advocacy Program
- Support Group Program
- Community Education
- Survivor Speakers' Bureau
- Fundraising/Development
- Administrative
- Community Outreach
- Childcare Program
- Holiday Gift Sponsor Program

Would you be willing to provide transportation for survivors?  Yes  No  
 Would you be willing to pick up donations in your area?  Yes  No  
 No

Language(s) spoken fluently

**Availability**

During what times are you available for volunteer assignments? Please circle all that apply.

M T W Th F morning      Sat Sun morning      Time \_\_\_\_\_ to \_\_\_\_\_  
 M T W Th F afternoon      Sat Sun afternoon      Time \_\_\_\_\_ to \_\_\_\_\_  
 M T W Th F evening      Sat Sun evening      Time \_\_\_\_\_ to \_\_\_\_\_

**Background**

**Have you ever been convicted of a criminal offence (felony or serious misdemeanor)?**

Yes       No

**If yes, please explain.**

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*It is the policy of REACH Beyond Domestic Violence that every applicant shall, as part of the application process, participate in a standard CORI background check. All background check information shall be treated as confidential and maintained in the volunteer's file located in a private office.*

**Please complete the CORI form and return with the application so REACH may complete the required CORI check (the CORI form is not available on-line and will be given to you upon receiving your application).**

**Please tell us more about you. If additional space is needed, please attach answers to this application on a separate sheet.**

**1. How did you hear about REACH Beyond Domestic Violence?**

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**2. Why would you like to volunteer with REACH Beyond Domestic Violence?**

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**3. What personal/profession knowledge/skills will you bring as a volunteer?**

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**4. Why do you think domestic violence happens?**

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**5. Have you or someone you know ever done something that has been considered abusive?**

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**6. What experience have you had with crisis situations (does not have to be related to domestic violence)?**

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**7. How do you handle conflict?**

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**8. What experience have you had working with people whose backgrounds/values are different that your own?**

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**9. Doing this work is difficult and affects everyone differently. How do you take care of yourself and how can we support you?**

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**For Interns Only**

*Please complete the following on a separate sheet and include with the application*

- What are the hourly requirements of the internship?
- What are the beginning and end dates of the internship? (How many weeks total?)
- What are the school requirements of the internship? (i.e. clinical supervision, etc.)
- What do you need and desire in an internship?

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**Please provide two references. One of a personal nature and one from a previous employer. Reference 1**

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(Name)

(Relationship)

**Contact Information**

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(Phone)

(E-mail)

**Reference 2**

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(Name)

(Relationship)

**Contact Information**

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(Phone)

(E-mail)

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I realize that by filling out this application, I will be considered for, but not guaranteed, a volunteer/intern position. If appointed, I agree to volunteer for one year. During that time I agree to abide by the policies and procedures of

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REACH Beyond Domestic Violence and to fulfill the volunteer responsibilities to the best of my ability.

**ALL APPLICANTS, PLEASE SIGN BELOW**

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(Signature)

(Date)

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