



Volunteer Application

Please fill out one form per person who is interested in volunteering. Volunteers ages 10 through 15 must be accompanied by a parent at all times while a child is volunteering. Adult application must accompany a child's application. All volunteers must complete the application, undergo a background check, and participate in a volunteer orientation session prior to engaging in volunteer activity with residents of any Noah's Ark Property.

Name* First _____ Middle Initial _____ Last _____

Birth Date* _____ MM/DD/YYYY Age* _____

Must be at least 10 years of age. Children ages 10-15 must be accompanied by a parent at all times and the parent must complete this application.

Please enter a number greater than or equal to **10**.

● Address* Street Address _____ City _____

🏠 State _____ ZIP Code _____ 📧 Email* _____

📞 Phone Number* _____

Do you have a Facebook profile (once confirmed, volunteers will be given access to a Noah's Ark Facebook chat room which will contain information about volunteers and volunteer opportunities) *?
Circle -Y or N

● Tee Shirt Size _____

Employer _____ Position _____

Address _____ City _____

State _____ Zip Code _____

🏠 **Driver's License or State ID # / Issuing State (especially needed for Drivers)**

PLEASE BRING PHOTO ID WITH YOU TO ORIENTATION.

DL# _____

🏠 **Special training, certifications, talents, hobbies, you have that will benefit our residents.**

Please indicate any languages that you speak, read, and/or write fluently, in addition to English.



List all of these below.

📋 References **Applies to Non-Parent and or Guardians***

List 2 references to please include the following information: Name, Relationship, Time you have known the contact, and their phone numbers.

📋 Noah's Ark of Central Florida has my permission to verify the 2 references that I have provided.

Signature

📋 Why are you interested in volunteering with Noah's Ark of Central Florida?

📋 Availability*

Please let us know what your general availability is. Many activities happen during the weekdays and evenings, as well as on weekends. **Also indicate if you are available for bigger events or functions only.**

- Sunday Morning
- Sunday Evening
- Monday Morning
- Monday Evening
- Tuesday Morning
- Tuesday Evening
- Wednesday Morning
- Wednesday Evening
- Thursday Morning
- Thursday Evening
- Friday Morning
- Friday Evening
- Saturday Morning
- Saturday Evening



- **Special (bigger) Event Schedule Only**

■ When would you like to start?

_____ Date Format: MM/DD/YYYY

■ **Have you ever been convicted of a felony?*** If yes please use the next section to explain.

- Yes _____
- No _____

■ If yes to above, please explain.

■ **Have you ever been convicted of a sexual offense, an assault, or the use of a weapon, or any crime involving the use, possession, or the furnishing of drugs?***

If yes please use next section to explain.

- _____ Yes
- _____ No

■ If yes to above, please explain.

■ **Have you ever been convicted adult or child abuse or neglect?***

If yes please use next section to explain

- _____ Yes
- _____ No

■ If yes to above, please explain.

Have you ever been charged or convicted of reckless driving, operating a motor vehicle while under the influence, or driving to endanger? Yes or No.

If yes please explain:



Have you ever volunteered before?*

If yes, please list the organization(s) and phone number(s) for references.

Noah's Ark of Central Florida has my permission to verify references that I have provided.

Signature

Do you have any experience with adults and/or children with disabilities (physical, cognitive?*) Please explain:

Don't worry if you have little or no experience we have training available for our volunteers!

- ___ Less than a year
- ___ 1-3 years
- ___ Over 3 Years
- ___ None, but willing to learn!

Indicate if you have a resident at Noah's Ark property and where.

Goals*

What are you hoping to achieve by becoming a volunteer with us and do you have any specific goals or objectives in mind?

Help is always needed. Please tell us what area(s) interest you the most – please check all that apply. Please note, some categories require board approval, additional experience and/or more extensive background checks in order to participate (July 2020).

- ___ Meals (helping to serve, coordinating)
- ___ Basic Volunteering (overseeing helping residents with activities, creating new activities with your experience, background and ideas)
- ___ Logistics (contacting, coordinating volunteers for specific activities, paperwork)
- ___ Fundraising to help with equipment, items for activities, larger events.
- ___ Driving/Transportation
- ___ Decorations for events, logistics
- ___ Community Outreach



- As needed

Would you be interested in servicing as Lead person for certain activities? Yes _____ No _____ Would you be interested in servicing on the Volunteer Activity Committee? Yes _____ No _____

Emergency Contact information

🏠 Emergency Contact Name*
First _____ Last _____
🏠 Relation to Volunteer* _____

🏠 Home/Mobile Phone Number* _____

🏠 Alternate Phone Number (work) _____

🏠 Medical Conditions?* _____
Do you have any medical limitations?

- Yes No 🏠 If Yes, please describe your condition and alert us how to help you in case of an emergency situation. **July 2020**

🏠 Rules for volunteering * Please read and abide by these rules for everyone's safety.

- 1) Release of Liability: All visitors and volunteers need to understand any risks inherent to volunteering and are required to sign a release of liability/ hold harmless in order to volunteer on any Noah's Ark property.
- 2) Volunteers Sign-in/Sign-out: Please be sure to sign in whenever you get here and out when you leave. This is so that we know who is on the property at any given time, and in order to track volunteer contributions. **You must wear the NA Activities Team Volunteer Identification badge or T-Shirt when volunteering. (this will be provided to you upon completion of Activities Volunteer orientation).**
- 3) Age Limits: Noah's Ark strives to ensure the safety of all volunteers, visitors, and staff at all times therefore; -Volunteers 16-17 years of age may only come unaccompanied if they have attended a volunteer orientation session and have parent/guardian AND NOAH'S ARK staff approval to do so. -Volunteers 9-15 years of age must work with parents or guardians at NOAH'S ARK ACTIVITIES and MUST BE SUPERVISED at all times. **-If under 9 years, please speak with an Activities Volunteer Committee member or email volunteers@noahsarkflorida.org about opportunities.**
- 4) Safety & Cleanliness: Keep all activity areas clean and exit doors clear. All Vans will be inspected by driver and volunteer staff for cleanliness. TRASH for all activities must be emptied and/or placed in proper bins.



- ___ 5) No Drugs or Alcohol: No alcohol or drugs will be tolerated on the property at any time. If there is reasonable suspicion of a volunteer being under the influence of alcohol or drugs they will be asked to leave the property.
- ___ 6) Safety/Respect: No yelling, profanity, aggression, demeaning language or drama please. Noah's Ark is an all-inclusive environment where everyone is treated with Dignity and Respect. If you have a concern please bring it to the Volunteer Activities Chair Committee (George Sells, Mickie Brown, MaryJo Abbatiello). **July 2020**
- ___ 7) Supplies: If you break an item, or notice that an item is broken or if you have any safety concern whatsoever, please notify the Activities Lead Volunteer and email the concern to volunteers@noahsarkflorida.org. If supplies for an activity are running low, please email volunteers@noahsarkflorida.org.
- ___ 8) Photos and sharing pictures on Social Media. Please be respectful and safe when sharing photos on your personal social media pages and tagging locations.
- ___ 9) Dress Code: Always wear appropriate clothing while volunteering and have a T-shirt/ID tag that has the Noah's Ark identifier on it.
- ___ 10) Volunteer Identification: Activities committee Volunteer ID Badge and/or T-Shirt must be worn when volunteering for any activity.

☞ Please Check below that you have read, understand and agree to abide by these rules*

- ___ Agree ___ Disagree

☞ Volunteer Release*

As a volunteer of this organization, I agree to abide by the aforementioned policies and procedures. I hereby acknowledge that I have voluntarily applied to participate as a Volunteer for the Activities Team at Noah's Ark of Central Florida properties, hereinafter referred to as NAT. I understand that the activities associated with volunteering at NAT and being around Adult Developmentally Disabled individuals may involve various communication styles and techniques. I further understand and agree to seek advice from the Volunteer Activities Committee, Lead Activities personnel, NA Staff, Family members and Guardians about the best and most effective way to be of assistance in a given activity and/or with any particular resident. I agree to always ask the Resident to determine the best way to be able to communicate.

In order to participate as a Volunteer with the Activities Team at NA, I hereby agree to release NA, any of its owners, volunteers, agents, employees, or trainers and their agents or employees from liability due to their ordinary negligence, and except in the event of NA gross and willful negligence, I shall bring no claims, demands, actions, and causes of action, and/or litigation, against Noah's Ark (NA) or any of its owners, volunteers, agents, employees or trainers or their employees for any economic and non-economic losses due to bodily injury, death, property damage, sustained by me and/or my minor child or legal ward to the premises and operations of while participating as a Volunteer with the Activities Team for events on or off NA properties.



discharge and covenant not to sue Noah’s Ark (including its Officers, Volunteers, Agents, Employees, and Board of Directors) from and against any and all liability for any and all claims.

_____ “YES, I agree.” *Initial* _____
Signature

NA USE ONLY

Received _____ Contacted _____ Orientation _____ T-Shirt Money _____
Background Check _____

FINALLY:

I promise to attend an **Activities Team Orientation** before volunteering with any Activities sponsored by the activity committee or staff at Noah’s Ark. Please print out a copy of your paperwork and bring with you to orientation. Remember to bring your driver's license or photo ID with you to your orientation (as applicable).

- Check that you have read, understand and agree to comply: Any children's application must be accompanied by an adult application. *
- Signature and or Electronic signature: Include full name of person completing this application. *

I affirm that I have answered all questions truthfully. I understand that if any portion of this application is found to be intentionally false, I may be denied the right to volunteer for Noah’s Ark of Central Florida.

_____ Signature _____ Date

Thank you for your application to volunteer at Noah’s Ark. We look forward to serving with you. Please save this document and email it as an attachment to the following address:

volunteers@noahsarkflorida.org