



2022-2023
VOLUNTEER/INTERN APPLICATION FORM

Date: _____

Date of Birth: _____

Name: _____ Home Phone: _____

Address: _____ Cell Phone: _____

City: _____ Zip Code: _____

Email address _____

In case of emergency, notify:

(Name) (Relationship) Phone: _____

Preferred area to volunteer: _____

Preferred way of contact: Phone: _____ Email: _____

Describe any previous volunteering experience you have had:

LOCATION	DATES	SUPERVISOR
_____	_____	
_____		_____
_____		_____

Do you have a valid driver's license? Yes ___ No ___

Have you ever been convicted or plead guilty to any crime(s): Yes ___ No ___

If yes, describe each in full:

(PLEASE READ AND SIGN THE INFORMATION ON THE BACK)

As a condition of volunteering at the St. Clair Street Senior Center, I give permission for the City of Murfreesboro to conduct a background check on me, which may include a review of sex offender registries, abuse registry and criminal history records. I understand that, if I am selected as a volunteer, my volunteering is conditional upon the City of Murfreesboro receiving no inappropriate information on my background. I hereby, release and agree to hold harmless from liability the City of Murfreesboro, the officers, employees and volunteers thereof, and/or any person or organization that may provide such information from any and all liability or damages including any and all claims which might be made based upon the providing of such information or use of such information by the City, its officers, employees and volunteers without regard to whether the information is accurate.

Applicant Signature _____ Date _____

Applicant Name (please print or type) _____

<p>The City of Murfreesboro does not exclude anyone from participation nor deny the benefits of or otherwise subject anyone to discrimination on the basis of race, nation origin, color, age, sex, disability or veteran status. Any complaint alleging discrimination may be filed with the Mayor of the City of Murfreesboro.</p>
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VOLUNTEER OPPORTUNITIES – YOUR HELP IS IMPORTANT!

We could not survive without our volunteers! Please place a next to the volunteer opportunities that interest you.

- | | | |
|--|---|--|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Health Expo | <input type="checkbox"/> Set up before events |
| <input type="checkbox"/> Call Bingo | <input type="checkbox"/> Knit or crochet lap robes | <input type="checkbox"/> Sign-In Table at events |
| <input type="checkbox"/> Clowns | <input type="checkbox"/> Library Assistant | <input type="checkbox"/> Singing Seniors |
| <input type="checkbox"/> Clean up after events | <input type="checkbox"/> | <input type="checkbox"/> Stuff bags for events |
| <input type="checkbox"/> Drama | <input type="checkbox"/> Reception Desk | <input type="checkbox"/> Take blood pressure |
| <input type="checkbox"/> Hand quilting | <input type="checkbox"/> Server (refreshments at events/dances) | <input type="checkbox"/> Telephone reassurance |

_____ Trip Escort

Instructor of:

_____ Bridge
_____ Calligraphy
_____ Ceramics/Pottery
_____ Chorus Director
_____ Computer
_____ Craft
_____ Dance
_____ Drama classes

_____ Exercise
_____ First Aid
_____ Foreign Language
_____ Genealogy
_____ Jewelry making
_____ Musical instrument
_____ Painting
_____ Scrapbooking

_____ Sewing
_____ Woodworking
_____ Other (please list)

Please tell us about your Previous Work and/or Volunteer experience:

**ST. CLAIR STREET SENIOR CENTER
BACKGROUND CHECK POLICY**

In order to preserve the safety and well-being of the seniors participating in City of Murfreesboro St. Clair Street Senior Center events, programs and activities, the St. Clair Street Senior Center hereby adopts the following policy requiring background screening for all volunteers and interns.

1. All volunteers and interns shall have annually submitted a fully completed official "Volunteer Application" to the Director of the St. Clair Street Senior Center or designee, prior to the volunteer or intern assuming their duties.
2. The Director of St. Clair Street Senior Center or designee shall conduct an annual background check on all individuals that are required to complete a "Volunteer Application" prior to the applicant assuming their duties. The St. Clair Street Senior Center shall not permit any person to participate as a volunteer or intern, whose background check reveals a conviction, guilty plea or plea of nolo contendere or received judicial diversion for any sexual offense regardless

of the amount of time since the offense (including but not limited to child molestation, rape, sexual assault, sexual battery, prostitution, solicitation, indecent exposure, etc.), any violent felony regardless of the amount of time since the offense (including but not limited to murder, manslaughter, aggravated assault, kidnapping, robbery, aggravated burglary, etc.) or any felony offense other than violence or sex within the past ten (10) years (including but not limited to drug offenses, theft, embezzlement, fraud, child endangerment, etc.). The City may prohibit any individual from participating as a volunteer or intern, if the City deems that the interaction of the individual with seniors is not in the best interest of the seniors. The Director of the St. Clair Street Senior Center or designee may conduct such search utilizing the Tennessee Sexual Offender Registry, Tennessee Felony Offender Information, and Tennessee Internet Crime Information Center, Out of State Probation and Parole Supervision Registry, Tennessee Elderly or Vulnerable Abuse Registry, Tennessee Meth Offender Registry or a professional law enforcement or background screening company.

3. If the St. Clair Street Senior Center becomes aware of information, by any means whatsoever, that an individual, including, but not limited to, volunteers and interns, has been convicted of or pled guilty to or received judicial diversion for a sexual offense or a violent felony, the St. Clair Street Senior Center must contact the applicable government agency to confirm the accuracy of the information. Upon confirmation of a conviction for, guilty plea to, plea of nolo contendere to or receipt of judicial diversion for any sexual offense regardless of the amount of time since the offense, any violent felony regardless of the amount of time since the offense, or any felony offense other than violence or sex within the past ten (10) years, the St. Clair Street Senior Center shall not permit the individual to participate as a volunteer or intern.



Statement of Confidentiality

Insuring privacy and confidentiality are important if participants are to feel confidence in the Senior Center and be willing to share vital information about themselves. It is the policy of the Center that every employee, volunteer, and intern shall protect the records and personal information of our program participants. We require that you agree to the following:

1. Respect the privacy of all participants.

2. Never discuss participants or their circumstances with anyone outside the agency.
3. Never discuss one participant with another.
4. Never discuss participants or their circumstances in public places in the Senior Center such as the lobby or hallways.
5. Persons without a legitimate reason should not read medical or social work records you might see in offices in the course of your work.
6. If documentation of participant contacts is required, I will:
 - a) Inform the participant that you maintain records of your contacts.
 - b) Record information factually.

I agree to the above instructions and pledge my commitment to the confidentiality of participant information.

Name

Date

c:/volunteers/stmtofconfidentiality.doc

CITY OF MURFREESBORO VOLUNTEER/INTERN WORKER

WAIVER AND RELEASE OF LIABILITY & HOLD HARMLESS AGREEMENT

PLEASE READ CAREFULLY

In consideration for permission to participate as a volunteer/intern in a City of Murfreesboro ("City") public service project for the:

_____ **ST. CLAIR STREET SENIOR CENTER** _____, I agree as follows:
Name of City Department and/or Location

1. I have considered and evaluated the risks, danger and possibility of injury resulting from participation as a volunteer/intern performing a public service project for the City of Murfreesboro.

2. I know and understand foreseeable and unforeseeable injuries from common or unexpected sources could occur from the actions of myself, other participants, the City, its employees, volunteers or interns, and other persons involved in this public service project.

3. I deliberately and knowingly assume all costs, risks of injury and/or other damages including, but not limited to, cost of my medical treatment, permanent injury or death, and my property damages resulting from my participation in the public service project. I waive, release and hold harmless the City, its employees, volunteers, and agents from all legal and financial responsibility and from all costs, injuries and/or other damages which might occur while I am participating in the public service project.

4. I give my permission to the City of Murfreesboro for any photos or video footage of myself taken during the course of this public service project to be used for educational, promotional, or any other purpose by the City of Murfreesboro.

5. Comply with the rules and regulations of the Senior Center. Be responsible to conduct becoming a professional.

Signature

Date

Print Name

Effective Date: 4-13-10

POLICY and GUIDELINES on ABUSE, NEGLECT and EXPLOITATION of CLIENTS

I. Policy

The St. Clair Street Senior Center complies with Tennessee Law that requires any person who suspects or witnesses abuse, neglect, or exploitation of a child or Senior Adult to report to the Department of Human Services (DHS). DHS has a responsibility under the law to investigate and manage the case in the community. Guidelines for evaluation, documentation, management, reporting and referral of suspected abuse, neglect, or exploitation, neglect, or violence will be consistent with Tennessee Law. It is **NOT** the responsibility of the Senior Center to investigate allegations or make determinations of abuse, neglect, or exploitation.

As a leading agency in services to senior adults, the St. Clair Street Senior Center, strives to set the standard in excellence in staff (paid and volunteer) and client (persons who are participants, recipients or consumers of the Senior Center programs and services) relationships. Staff will interact with clients in a respectful, professional manner and will refrain from any form of verbal, mental or physical abuse, neglect or exploitation of clients.

II. Identification Criteria may include, but are not limited to:

A. Children

1. History is incompatible with the pattern and/or degree of injury.
2. Explanation of how injury occurred is vague or contradictory, and/or involved adults are reluctant to provide information.
3. History is not possible, given age of child.
4. Adult's concern is inappropriate in relation to the extent of the injury.
5. Interaction between child and adult appears to be inappropriate.

B. Adults

1. Client admits to abuse, neglect or exploitation.
2. Client has untreated old injuries.
3. Explanation of physical injuries (bruises, swelling, etc.) is vague or unsatisfactory.
4. Adult is not having basic daily needs (food, shelter, and cleanliness) met either personally or by others who are in a caregiving role.
5. Client is verbally abused, unduly criticized, or in any way treated unkindly or negatively.
6. Client is expected to perform duties without proper explanation or instruction.

POLICY and GUIDELINES on ABUSE, NEGLECT and EXPLOITATION of CLIENTS

(continued)

III. Guidelines for Screening and Reporting Procedures.

A. When a client reports abuse, neglect or exploitation, or a volunteer or staff member suspects or witnesses abuse, **ALL** of the following actions will be taken:

1. Contact Volunteer Supervisor at the Senior Center verbally, then in writing, any form of abuse with name of client, individuals involved, date/time/place and detailed description of the incident.
2. Second level supervisor and the Center Director or designees will be notified immediately to assist in the process.
3. Staff contact DHS (phone 898-8000) to make a report.
4. Complete an incident report and documentation for client file.
5. Participate in team meetings to plan for future interactions with client, family, etc.

B. Actions to be taken if a staff member is witnessed or suspected:

1. All procedures in III A apply.
2. Staff are to refrain from discussing the incident with anyone other than supervisors involved. Only the Center Director or designee are to discuss the incident with the family and client.
3. The Director will notify City Human Resources and Legal Staff to make recommendations for action to be taken.

* * * * *

I have carefully read the Policy and Guidelines on Abuse, Neglect and Exploitation of Clients, and understanding all sections, agree to abide by these policies and procedures.

Print Name

Date

Signature