



## Volunteer Information Form

Please complete the following information form. Although some of these questions may feel invasive, they are necessary for the protection of our clients and in the processing of references and Criminal Background Information. Confidentiality is important to our organization and yours will be respected. Your cooperation is appreciated!

<b>How did you hear about us?</b>			
<b>Name:</b>		<b>Date:</b>	
<b>Address:</b>		<b># Years There:</b>	
<b>City, State, Zip:</b>	<b>Home Phone:</b>	<b>Mobile Phone:</b>	
<b>Business Phone:</b>	<b>Email:</b>	<b>Fax Number:</b>	
<b>Date of Birth:</b>	<b>Birthplace (City &amp; State):</b>		
<b>Place of Employment:</b>	<b>Position:</b>	<b>#Years There:</b>	
<b>Supervisor's Name:</b>		<b>Phone Number:</b>	
<b>Business Address:</b>		<b>City, State, Zip:</b>	
<b># of Children:</b>	<b>Names/Ages:</b>	<b>Do your children live with you?</b>	
<b>Height:</b>	<b>Weight (approx):</b>	<b>Eye Color:</b>	<b>Hair Color:</b>
<b>Race:</b> <input type="checkbox"/> Anglo <input type="checkbox"/> African-American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Native American <input type="checkbox"/> Other			
<b>Social Security Number:</b>	<b>Driver's License #/State:</b>	<b>Other (Student ID):</b>	
<b>In the event of an emergency, contact:</b>			
<b>Name:</b>	<b>Relationship:</b>	<b>Phone #:</b>	
<b>Do you expect any changes in marital status, employment or residence within the next year?</b> Yes <input type="checkbox"/> No <input type="checkbox"/>			
<b>Please respond to the following questions. An affirmative response will not necessarily prevent or restrict volunteer activities:</b>			
1. Do you use illegal drugs?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. Have you ever been convicted of a criminal offense?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. Have you ever been charged with neglect, abuse or assault?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. Has your driver's license ever been suspended or revoked in any state?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
<b>If you responded "yes" to any of the above, please explain:</b>			
<b>Are you a student?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	<b>If yes, School/University Name:</b>

**Personal References** (non-family). *At least one must be a professional reference.*

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Email: \_\_\_\_\_ Phone#: \_\_\_\_\_

1.

2.

3.

4.

**List any previous volunteer experience:**

Organization: \_\_\_\_\_ Contact Name/Email or Phone: \_\_\_\_\_ Your Involvement: \_\_\_\_\_ Dates: \_\_\_\_\_

**List any service or groups that you belong to or participate with:**

alley's house has many diverse needs and opportunities for volunteers. Please check your area of interest:

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Administrative     | <input type="checkbox"/> Funds Development Committee | <input type="checkbox"/> Special Events Committee |
| <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Intern                      | <input type="checkbox"/> Tutoring                 |
| <input type="checkbox"/> Child Care         | <input type="checkbox"/> Marketing                   | <input type="checkbox"/> Workshop Facilitator     |
| <input type="checkbox"/> Finance Committee  | <input type="checkbox"/> Mentoring                   | <input type="checkbox"/> Other (please specify):  |

How many hours can you volunteer? \_\_\_\_\_ (Check one that applies):  Weekly  Monthly

What times can you volunteer? (Check all that apply)  Evenings  Weekends  Weekdays

Do you carry the legal minimum automobile insurance?  Yes  No

Have you been trained in first aid and/or CPR?  Yes  No

Other information you feel may be a valuable contribution to alley's house?

Please read before signing:

- I understand that the information I have provided may be verified and I give permission to alley's house to make inquiry of others concerning my suitability as a volunteer.
- In the course of volunteering, I may be dealing with confidential information and I agree to keep said information in confidence.
- I affirm that I have read the above and that the information I have given is true and complete.

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

Please attach a copy of your Driver's License, Liability Insurance Card, the Criminal Background Check Consent Form and the Mentor Profile Form if you're applying for a mentor position. Please scan and email forms to [program.director@alleyshouse.org](mailto:program.director@alleyshouse.org) or mail to: 4113 Junius St., Dallas, TX 75246. If you have questions, please call 214.824.8700.



## VOLUNTEER CODE OF ETHICS AND RULES

1. Smoking or use of tobacco products in the presence of teen moms is prohibited.
2. Using, possessing, or being under the influence of alcohol or illegal drugs is prohibited.
3. Volunteers must treat teen mothers of all races, religions, and cultures with respect and consideration.
4. Volunteers must use positive techniques of guidance, including positive reinforcement and encouragement rather than competition, comparison or criticism.
5. Volunteers will abstain from humiliating or frightening discipline techniques.
6. Volunteers will not use profanity in the presence of teen moms.
7. Volunteers will refrain from inappropriate displays of affection toward teen moms.
8. Volunteers must be free of physical and/or psychological conditions that might adversely affect the teen mom's health, including fever or contagious conditions.
9. Volunteers will portray a positive role model for youth by maintaining an attitude of respect, loyalty, patience, integrity, courtesy, tact and maturity.
10. Texas State law requires all citizens to report any suspected abuse or neglect of a child to the Texas Department of Protective and Regulatory Services.
11. I understand that as a volunteer for alley's house, I will be subject to a background check, including criminal history.

I have read and understand that any violation of this code may be grounds for removal as a volunteer. By signing this statement, I release alley's house from all liability in connection with any volunteer activities.

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Volunteer's Signature

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Date



## CRIMINAL BACKGROUND CHECK CONSENT FORM

### Authorization for Parties to Release Information Indentification for all parties involved in background investigation

**I authorize** alley's house, their staff or their agents to investigate my background and character, and authorize all persons, companies, law enforcement agencies and schools to release information concerning my background, character and suitability to become a volunteer.

**I understand** that this information may include, but is not limited to, arrest, conviction and driving record information, and I hereby release al local, state, federal law enforcement and other agencies, their officers, employees, administrators and all other persons, companies, schools, firms, organizations or agencies of any kind from any liability or claim of any sort for providing background information concerning me.

**I, the undersigned, do** for myself, my heirs, executors and administrations, hereby remise, release and forever discharge and agree to indemnify and hold alley's house, The Volunteer Center of Dallas County, each of their officers, directors, employees and agents harmless from any and all/related attorneys fees, court costs and any other expenses resulting from the investigation of my background, gathering information concerning me or otherwise verifying personal information in connection with my application to become a volunteer.

**I understand** that this information will be used to determine my eligibility for a volunteer position within this organization. I also understand that as long as I remain a volunteer, the Agency may repeat these investigations at any time.

Have you ever been charged or convicted of a misdemeanor or felony?  
If yes, please check check all that apply and explain:

- |                                      |                                    |
|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Yes         | <input type="checkbox"/> No        |
| <input type="checkbox"/> Charged     | <input type="checkbox"/> Convicted |
| <input type="checkbox"/> Misdemeanor | <input type="checkbox"/> Felony    |

Details: \_\_\_\_\_  
\_\_\_\_\_

Please print your complete, legal name: \_\_\_\_\_

Sex:  Male  Female

List all cities/states you have lived in since age 18: \_\_\_\_\_  
\_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

\* There is a \$7.00 fee for processing your criminal background check. Please mail check to:  
4113 Junius St, Dallas, TX 75246

OR

Please provide you credit card information:

Card type: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Card Number: \_\_\_\_\_

Billing Zip Code: \_\_\_\_\_



## Program Highlights

### **Mission Statement**

To empower teen mothers and their children to achieve independence through support services, education and mentoring.

### **Case Management Services**

Assist teen moms in creating individualized goal plans and outlining activities to help them achieve their goals. We also ensure teen moms are utilizing community services where necessary and refer to outside agencies for additional needs.

### **Mentors for Young Mothers Program**

Match teen moms participating in our program with a volunteer mentor from within the community. The mentor meets with the teen mom 6 hours per month and the match is for one year. The mentor works directly with her to assist her in accomplishing her Goal Plan as well as other fun activities. Activities are coordinated with both the teen mom and volunteer's schedules.

### **Life Skills Workshops**

A series of life-skill workshops designed to teach the teen moms the necessary skills to achieve independence. Topics range from parenting skills to career planning. Our workshops are held every Wednesday from 12-1 pm.

### **Computer Training**

On-line computer training is provided to all teen mothers participating in the program. Microsoft Office products and keyboarding are included.

### **GED Tutoring**

One-to-one GED tutoring in all subject areas for teen mothers.

### **On the Job Office Training**

Teen moms can learn all the skills needed to get an entry level office position.

### **Parenting at Home Program**

Match teen mother with a volunteer who will assess and recommend positive parenting techniques.

For more information, please call alley's house at 214.824.8700 or email at [program.director@alleyshouse.org](mailto:program.director@alleyshouse.org).