



Mary's
Center

Volunteer application form

Personal Information

First Name:

Last name:

Address:

City:

State:

Zip Code:

Tel./Home:

Work:

Fax:

E-mail:

Occupation:

F/T: P/T:

Language(s) other than English:

Spoken Fluently()

Written ()

Education: Please indicate last grade completed: High School () College () Graduate Level ()

Ever volunteered at Mary's Center? Y__ N__ When? _____ In which position?

If you have a resume, please attach to this application. Otherwise, give us a short history of your experience:

Volunteer Interest

What activities are of volunteer interest to you?(Please check):

- () **Tutor**--Tutor young children in basic skills (language, reading, fine and gross motor skills, colors, etc.)
- () **Mentor**-- Mentor teens or teen mothers
- () **GED or English Mentor**--Help parents earn their GED or learn English.
- () **Parent-Teacher liaison**-- Help parents fill out forms, translate, follow up with child progress at school.
- () **Child/Patient Advocate**--Help parents or patients Help parents fill out forms, translate, follow up with child progress at home.
- () **Play Group/Play Room activities**-- Work with children during scheduled group activities or field trips.
- () **Advocacy**-- Participate or coordinate activities that insure the community well-being.
- () **Translation/Interpretation**-- Languages needed: Amharic, Arabic, Spanish, Vietnamese, Korean
- () **Special Events**-- Coordinate/staff informational booth during community events, health fairs, or our yard sale.
- () **Coordinate Holiday Events**-- Organize activities for Mother's day or end of year holidays activities.
- () **Clerical/Data Entry**-- Enter data, arrange medical charts, file, coordinate mailings, arrange resource shelves
- () **Rapid Response Network**-- Be part of network of "on-call" volunteers for special or last minute assignments.
- () **Newsletter**-- Edit a newsletter or write articles.
- () **Computer Technician**-- Install hardware and software including Windows 95, 98, NT, 2000, XP Professional, Microsoft Office 97, 2000 and Publisher. Also install educational software, wireless LAN. General maintenance, help-desk, design User's guide.
- () **Web Master**-- Update webpage Quarterly report and newsletter, design and setup an intranet starting with a staff directory.
- () **Computer Trainer**-- Monitor and assist patients and staff in computer lab (Windows, Word,

Excel, PowerPoint, Publisher, Access, Outlook, Web searches).

Other: _____

Availability

Mary's Center's Business hours are 8:30 a.m. ~ 5:00 p.m., Monday through Friday. During the year, we schedule special events and fundraising activities some of which occur on weekends and evenings. Please indicate your volunteer availability by circling the period or periods when

Day	Morning hours	Afternoon hours	Evening hours
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

How many hours per week are you available to volunteer? Maximum _____ hrs. Minimum _____ hrs.

How did you learn about Mary's Center? _____

Is your volunteer service part of a community volunteer program? Yes () No ().

If so, please give us the name, address, and phone of the organization: _____

Will you need a letter describing your volunteer activities? Yes () No (). Direct to: _____

Important Information

In case of emergency contact:

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

Are there any disabilities or special needs that Mary's Center should take into account when you are providing volunteer services? Y () N () Please describe. Indicate anything else you'd like us to consider when placing you: _____

For office use only:
1st contact _____ Received _____ Welcome _____ Vol Apptmt _____ Orientation _____
Review: 6 m _____ 1 yr. _____ Recognition _____

Below is the volunteer agreement that must be completed and signed by all Mary's Center volunteers. In the space that asks for "Name of Supervisor" please write "Volunteer Coordinator" unless you have already been specifically assigned to help an employee at Mary's Center.

Please print and fill out the form, and mail, fax or E-Mail to:
Mary's Center for Maternal and Child Care, Inc.
2333 Ontario Road NW, Washington, DC 20009, Attn: Andreina Pradas

Fax: (202) 332-0541

Phone: (202) 420-7112 apradas@maryscenter.org

VOLUNTEER AGREEMENT
Between Mary's Center for Maternal and Child Care, Inc. and

Full Name

THIS AGREEMENT ("Agreement") is made by Mary's Center for Maternal and Child Care, Inc., a corporation at 2333 Ontario Road NW, Washington, District of Columbia 20009 ("Mary's Center") and

(Volunteer Full name)_____

at_____

(Full Name Address, Apt. #, City, State, Zip Code).

WHEREAS, Mary's Center wishes to utilize Volunteer's services and abilities, and Volunteer is willing to offer such services upon the terms and conditions contained in this Agreement;

NOW THEREFORE, in consideration of the promises contained herein, the parties agree as follows:

1. **Engagement and Duties.** During the term of this Agreement, Mary's Center hereby engages Volunteer and Volunteer hereby agrees to provide services to Mary's Center as an non-paid volunteer worker. Volunteer shall be available to work at reasonable times and for reasonable periods of time to perform the services asked by Mary's Center. Volunteer shall abide by all of Mary's Center's policies and procedures when providing services to Mary's Center. Schedule will be arranged with_____ (Name of Supervisor), your contact and supervisor at Mary's Center.

As Volunteer at Mary's Center, duties will be worked out with the supervisor named above.

2. **Responsibilities:** Volunteer shall notify the supervisor immediately should a situation arise that may cause a conflict of interest and/or that Volunteer is not specifically trained to resolve. Should Volunteer choose to transport Mary's Center's clients in Volunteer's

own personal vehicle, Volunteer shall do so at his/her own risk under Volunteer's own vehicle insurance and shall not hold Mary's Center liable should an accident/injury occur. Volunteer shall not hold Mary's Center, its employees, contractors, clients, and other volunteers liable for Volunteer's contracting any disease or illness in the very unlikely event that this may result from Volunteer providing services to Mary's Center.

3. **Term.** This Agreement shall begin today, _____ and shall terminate when Volunteer is no longer willing or able to fulfill the duties assigned, but not before giving at least one week's notice of termination of those duties. Volunteer's services may be terminated by Mary's Center at any time with or without any cause.

4. **Compensation.** Volunteer's providing services at Mary's Center is strictly voluntary and unpaid.

5. **Confidentiality.** Volunteer, in the course of providing services to Mary's Center, may learn the identity and other personal or business-related information concerning Mary's Center's clients, employees, and other contractors. Volunteer shall treat such information as strictly confidential. Volunteer shall not disclose the names or any information concerning Mary's Center's clients, employees, and other contractors to any person(s) not affiliated with Mary's Center and authorized by Mary's Center to whom such information pertains. Unauthorized use or other breach of privacy/security may result in termination of the Contract and may result in criminal prosecution. Mary's Center will report to the Federal Bureau of Investigation (FBI) any contractor who gives, sells, trades or otherwise provides confidential/private information to unauthorized users and/or persons/organizations.

6. **Non-Discriminatory Statement.** Volunteer, when performing service, shall provide considerate and respectful care for any client of Mary's Center without prejudice or discrimination of any kind. Contractor shall provide services in a non-judgmental/non-discriminatory manner, without regards to one's race, color, religion, national origin, sex, familial status, age, marital status, personal appearance, sexual orientation, family responsibilities, disability, matriculation, political affiliation, source of income or place of residence/business.

7. **Miscellaneous.** This Agreement shall inure to the benefit of and be binding upon the parties and their respective successors, assigns, heirs and personal representatives and, except as specifically provided herein, neither party may make any assignment of this Agreement or any interest therein without the prior written consent of the other party. It is understood and agreed that Mary's Center shall have the right to assign this Agreement to any successor to all or substantially all of its assets and business by dissolution, merger, consolidation, transfer of assets or otherwise, or to any direct or indirect subsidiary of Mary's Center.

The laws of the District of Columbia shall govern this Agreement.

If any provision of this Agreement is invalid or inoperative under law, the remaining provisions of this Agreement shall continue in full force and effect.

This Agreement contains the entire agreement of the parties, and supersedes any and all previous agreements they may have made, whether orally or in writing.

IN WITNESS WHEREOF, the parties hereto have set their hands.

Maria S. Gomez, President/CEO
Mary's Center for Maternal and Child Care, Inc.

Date _____

Signature _____

Social Security Number _____

Printed Name (Please print clearly) _____

Date _____