

Dear Applicant,

Thank you for your interest in volunteer opportunities at Townhall II. Following is information on various volunteer opportunities. Take a moment to read over each description to find the opportunity that is right for you. Please note this area of interest on your application.

### **24-Hour Crisis Helpline**

The training program consists of approximately 80 hours of lecture, role-plays, on the job observations, and other activities. Training is offered three times a year, at varying times. Attendance at each session is mandatory. After successful completion of the program, volunteers will be able to provide intervention for people in crisis who call the crisis Helpline or walk in at Townhall II. After completing the training program, volunteers are required to answer the Helpline for 200 hours over the course of a year. Volunteers usually choose to do this by volunteering four hours each week. The training will teach you about yourself while showing you how to help others. It is a rewarding, but challenging experience.

### **Crime Victim Advocacy**

Crime Victim Advocates provide hands-on emotional support and assistance to victims of violent crimes. Crime Victim Advocacy training includes crisis intervention training, lecture, discussion, supervised role-playing, and skill-building activities. Participants learn about listening and communication skills, healthy boundaries, self-care, sexual assault, domestic violence, stalking, and other violent crimes, as well as tour a Sexual Assault Nurse Examiners Unit. Must submit an application, complete a brief interview, and complete the 40-hour training. Trainees who successfully complete the 40-hour training are asked to fulfill a 200-hour minimum volunteer commitment.

### **Victim Outreach Program Teen Team**

The Teen Team is a fun and rewarding volunteer opportunity for teens currently enrolled in high school. All teens must have parental permission, as well as their own transportation, to participate. Must complete a brief interview, submit an application, and complete initial training. Training includes listening and communication skills, healthy boundaries, self-care, overview of Townhall II services, lecture, discussion, and skill-building activities.

### **Medical Clinic**

Professional volunteer RNs, LPNs, and MAs assist in rooming patients during clinic hours. Physicians and Nurse Practitioners needed to provide acute and chronic health services. Current licensure required for all professionals.

If you are interested in participating in one of these programs, please return the application to:

Townhall II  
Attn: Barbara Folan  
155 N. Water Street  
Kent, Ohio 44240

We will contact you to discuss the status of your application. Please feel free to contact us with any questions or concerns you might have at 330-678-3006.

**All applicants must be interviewed before acceptance into any training program or volunteer position. If accepted, applicants are required to submit to a criminal background check, drug test and TB test. Direct service cannot begin prior to the successful completion of all three. Information on where to obtain these services will be provided by Townhall II.**

Date Received \_\_\_\_\_

For Office Use Only

_____	_____
_____	_____
_____	_____
_____	_____

## Townhall II Volunteer Application

Please print or type

Name: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Last First Middle

E-mail address \_\_\_\_\_

Current address:

\_\_\_\_\_  
No. Street City State Zip

Phone: ( ) \_\_\_\_\_ Work phone (optional): ( ) \_\_\_\_\_

Best times to call to reach you: \_\_\_\_\_

Permanent address:

\_\_\_\_\_  
(if different than above) No. Street City State Zip

Permanent phone: ( ) \_\_\_\_\_

Where did you hear about our volunteer opportunities? \_\_\_\_\_

I am interested in the following volunteer opportunities at Townhall II (please check all that apply):

\_\_\_\_\_ Helpline \_\_\_\_\_ Crime Victim Advocacy  
\_\_\_\_\_ Medical Clinic\*\* \_\_\_\_\_ Victim Outreach Teen Team

\*\*Medical license required to apply  
(i.e. RN, LPN, MA)

### Record of Education

School	Name and Address of School	Course of Study	Circle Last Year Completed				Did you Graduate?	List Diploma or Degree
High School	_____	_____	1	2	3	4	____ Yes ____ No	_____
	_____							
	_____							
College	_____	_____	1	2	3	4	____ Yes ____ No	_____
	_____							
	_____							
Other (specify)	_____	_____	1	2	3	4	____ Yes ____ No	_____
	_____							
	_____							

Have you completed any special courses, seminars and/or training that relate to the volunteer work you are applying for?  
YES ( ) NO ( ) If yes, please describe:

\_\_\_\_\_

List three benefits that you might expect to receive from volunteering at Townhall II.

\_\_\_\_\_

\_\_\_\_\_

List three qualities you have which will benefit the program(s) that you are interested in.

\_\_\_\_\_

\_\_\_\_\_

**List present and past employment and volunteer experiences. Begin with your most recent.**

Name and Address of Company and Type of Business	From		To		___ Volunteer ___ Paid	Reason for Leaving
	Mo	Yr.	Mo	Yr.		
	Describe the Work You Did:					
Phone: ( )	Name of Supervisor:					

Name and Address of Company and Type of Business	From		To		___ Volunteer ___ Paid	Reason for Leaving
	Mo	Yr.	Mo	Yr.		
	Describe the Work You Did:					
Phone: ( )	Name of Supervisor:					

Name and Address of Company and Type of Business	From		To		___ Volunteer ___ Paid	Reason for Leaving
	Mo	Yr.	Mo	Yr.		
	Describe the Work You Did:					
Phone: ( )	Name of Supervisor:					

I hereby give permission to contact the employers listed above concerning my prior work experience.

Signed: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

List employer(s) you do not want us to contact. \_\_\_\_\_

**Personal References** (List two people who are not former employers or relatives)

References may be contacted to gather additional information about you.

Do not list anyone you do not want contacted.

Name and Occupation	Address	Phone
		(    )
		(    )

**Are you available to volunteer for at least one year after your training? (Please note: not all of our programs require a one year commitment). Yes \_\_\_\_\_ No \_\_\_\_\_**

Days and Hours Available:

Day	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From:							
To:							

**I certify that all answers given by me are true, accurate and complete, I understand that the falsification, misrepresentation or omission of fact on this application (or any other accompanying or required documents) will be cause for denial of acceptance as a volunteer or immediate termination of my volunteer position, regardless of when or how discovered.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Chosen applicants are required to submit to a Criminal background check and drug test (if applicable). Direct Service cannot begin prior to the successful completion of both. Information on where to obtain these services will be provided by Townhall II.**

**It is the Agency's policy not to discriminate against any person or group of persons on the basis of; race, ethnicity, age, color, religion, sex, sexual orientation, national origin, disability, and veteran status in the recruitment, selection, evaluation or retention of volunteer/interns**

**Please submit completed applications to:**

**Townhall II  
Attn: Barbara Folan  
155 North Water Street  
Kent, OH 44240**

**They can also be faxed to 330-678-7558.**

**Thank you for your interest in volunteering with Townhall II!**