



LA CASA DE LAS MADRES VOLUNTEER APPLICATION

THIS APPLICATION IS 3 PAGES

NAME _____ APPLICATION DATE _____

ADDRESS _____ HOME PHONE _____

_____ WORK PHONE _____

EMAIL _____ CELL PHONE _____

EMPLOYER _____ JOB TITLE _____

DOES YOUR EMPLOYER HAVE A MATCHING GIFT/INCENTIVE PROGRAM? Yes/No

ARE YOU A STUDENT? Yes/No School and area of study: _____

These questions are for funding purposes and are optional:

ETHNICITY/RACE _____ AGE _____

LANGUAGES SPOKEN _____ FLUENT? Y/N READ/WRITE? Y/N

RELATED WORK/VOLUNTEER EXPERIENCE

Organization/ Program	Dates	Duties/Job Title
_____	_____ to _____	_____
_____	_____ to _____	_____
_____	_____ to _____	_____

WHAT TYPE OF VOLUNTEER WORK ARE YOU INTERESTED IN?

SHELTER ___ OUTREACH ___ COURT ACCOMPANIMENT ___ CRISIS LINE ___

ADMINISTRATION ___ CHILDREN'S PROGRAM ___ TEEN PROGRAM ___

DOMESTIC VIOLENCE RESPONSE TEAM ___ WRITTEN TRANSLATION ___

OTHER _____

WHY ARE YOU INTERESTED IN VOLUNTEERING?

DO YOU HAVE ANY EXPERIENCE WORKING WITH DOMESTIC VIOLENCE VICTIMS?

La Casa de las Madres 415-503-0500 www.lacasadelasmadres.org

1663 Mission Street, Suite 225, San Francisco, CA 94103

Adult Crisis Line 1-877-503-1850 24-hours, toll-free

PLEASE FAX ATTN: VOLUNTEER COORDINATOR FAX 415-503-0301 or email: Jamie@lacasa.org



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qualified domestic violence shelter-based organizations with the capacity to hold confidential communications.

- La Casa requires 40 hours of completed volunteer work prior to issuing a certificate of training completion. We also offer the 40-hour training course for professional development for a fee.
- Pursuant to California law, prior to beginning volunteer work involving direct interaction with clients, volunteers are required to submit a full set of fingerprints for the purpose of conducting a background check.

La Casa de las Madres is committed to providing equal opportunity to all employment and volunteer applicants.

"I ACKNOWLEDGE RECEIPT OF THE ABOVE INFORMATION. I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF SELECTED FOR THIS VOLUNTEER PROGRAM, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL."

Name

Date

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