

# PEACE AT HOME ADVOCACY CENTER

PO Box 1942  
 Roseburg OR 97470  
 (541) 957-0288  
 www.peaceathome.com



**Peace at Home**  
 ADVOCACY CENTER

## Volunteer Application

APPLICANT INFORMATION			
Last Name	First	M.I.	Date
Mailing Address		Apartment/Unit #	
City	State	ZIP	
Phone	E-mail Address		
Days/Times Available		Preferred Method of Contact: <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Text	
Areas of interest (check one or more): <input type="checkbox"/> Direct Service with clients e.g. answer crisis line calls, conduct assessments at the office, support groups <input type="checkbox"/> Assist Legal Advocacy team e.g. work with clients to complete restraining orders, peer support at court <input type="checkbox"/> Facilities Maintenance e.g. gardening, repairs, painting, cleaning, sorting/organizing donations of clothing etc. <input type="checkbox"/> Sexual Assault Response Services Team e.g. answer crisis line calls, rape response to the ER, community education about sexual assault <input type="checkbox"/> Administrative Support e.g. mailings, data entry, customer service, filing, sort donations etc. <input type="checkbox"/> Events & Outreach Activities <input type="checkbox"/> Other. Please list _____			
Have you ever volunteered for Peace at Home Advocacy Center before? YES <input type="checkbox"/> NO <input type="checkbox"/> If so, when?			
How did you hear about volunteer opportunities at Peace at Home Advocacy Center?			

EDUCATION			
High School		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree
College		Address	
From	To	Did you graduate? YES <input type="checkbox"/> NO <input type="checkbox"/>	Degree

REFERENCES	
<i>Please list two character references.</i>	
Name	Relationship
Company	Phone ( )
Name	Relationship
Company	Phone ( )

### QUESTIONS:

1. What interests you to volunteer at Peace at Home Advocacy Center?
  
2. What are you passionate about?
  
3. What skills, strengths or experience do you have to offer as a volunteer?
  
4. What does volunteering look like to you?

**VOLUNTEER EXPERIENCE (OR RELATED WORK EXPERIENCE)**

List most recent volunteer work first, add additional pages if necessary.

Organization	Phone (    )
Volunteer Title	
Responsibilities	
Organization	Phone (    )
Volunteer Title	
Responsibilities	
Organization	Phone (    )
Volunteer Title	
Responsibilities	

**DISCLAIMER AND SIGNATURE**

I certify that this application contains no misrepresentations or falsifications and that the information given is true and complete to the best of my knowledge. I understand that I will be invited to be interviewed for a volunteer position and consent to a criminal background check.

Signature	Date
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