



## Volunteers and Interns Application

We are grateful for the number of Volunteers and Interns who spent substantial period of time to help with our office tasks here at Dina's Dwellings.

### Contact Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

### Educational Back ground

High school graduation year \_\_\_\_\_ College/ University \_\_\_\_\_

Degree \_\_\_\_\_ Major \_\_\_\_\_

1. Are you 18 years or older?

Yes

No

2. Have you ever been convicted of a crime?

Yes

No

3. Do you have any outstanding warrants from NJ or any other State or territory of the US?

Yes

No

4. Are you a survivor of Domestic violence?

Yes

No

*(Please note that if you answer yes to this question, TCCDC requires an individual to wait a minimum of 12 months before volunteering with us.)*

5. Availability per week during the business hours of 9:30am-5:00pm (but we also may need evenings/ nights?)

Days & Hours \_\_\_\_\_

*(Please sign up for a minimum of 5 hours a month.)*

6. If you are an intern, please name three learning goals that you seek to attain by the end of your internship.

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7. Please describe any work, volunteer or personal skills you have or would like to utilize.

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8. Please describe why you choose Dina's Dwellings as a site for your internship/ volunteer?  
(Maximum 200 words)

**Name two references**

**Reference number one**

Name \_\_\_\_\_ Relationship to the applicant \_\_\_\_\_

Email \_\_\_\_\_

Telephone Number \_\_\_\_\_

Reference contacted date	
By:	

**Reference number two**

Name \_\_\_\_\_ Relationship to the applicant \_\_\_\_\_

Email \_\_\_\_\_

Telephone Number \_\_\_\_\_

Reference contacted date	
By:	

**In case of emergency, person you would like us to contact:**

Name \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_ Alternative phone \_\_\_\_\_

**Are there any medical conditions that TCCDC ought to be aware of?**

Please describe: \_\_\_\_\_

## Rules and Regulations of Town Clock CDC

\_\_\_\_\_ Taking photographs or videos of the tenants or the interior of any apartments are not permitted.

\_\_\_\_\_ Divulgence of the tenants' names outside the Town Clock offices is strictly prohibited.

\_\_\_\_\_ Volunteers/interns must sign and adhere to a strict confidentiality agreement.

\_\_\_\_\_ Volunteers and Interns are required to attend minimum of two hours of Domestic Violence training provided by the Case Manager. Those who will have direct tenant contact may be required to attend 40-hour training required for victim counselor privilege.

\_\_\_\_\_ Intern/volunteer will not receive any wages or fringe benefits, including insurance, from TCCDC associated with the internship/volunteer work. Intern/volunteer may be reimbursed, however, for agreed-upon expenses at the discretion of his/her TCCDC supervisor.

\_\_\_\_\_ This internship/volunteer work may be terminated by TCCDC or the Intern/volunteer for any reason upon giving written notice. Unless terminated prematurely, this internship/volunteer work is expected to begin and end approximately on the following

Dates: [mm/dd/year – mm/dd/year] \_\_\_\_\_

Intern/volunteer will be primarily supervised by \_\_\_\_\_

### Interns/Volunteer

Signature

Date

\_\_\_\_\_

\_\_\_\_\_

### For Internal Process

Item	Signature	Date
Executive Director		
Case Manager		
Background check		
Two hour training		