



NEW BEGINNING CENTER

Welcome,

Thank you for your interest in volunteering for the New Beginning Center. New Beginning Center (NBC) is a non-profit domestic violence agency dedicated to promoting social change leading to the elimination of domestic violence. Our services to the community include emergency shelter for battered women and their children, outreach counseling for adult victims and their children, a battering intervention and prevention program (BIPP), emergency assistance, food pantry, community education, and our New Beginning Resale Shop.

We have many exciting service opportunities to suit almost every schedule and interest level. Volunteer jobs include working in the shelter, with the children's program, in our resale shop, in fundraising and development, assisting in the office, answering hotline calls, Speaker's Bureau, Partner Contact within the BIPP program, serving as a Court Monitor, and much more!

Outlined below are the steps to becoming an NBC Volunteer:

1. Attend New Volunteer Orientation- (there is one every month)
2. Complete our application packet (to be completed at an interview)
3. Successfully complete our screening process (to include a criminal background check, personal interview, and reference checks)
4. Attend appropriate NBC training related to your area of interest.

All NBC Volunteers must attend New Volunteer Orientation before participating in any volunteer service. Additional training, including classes on domestic violence, is required for most volunteer jobs and before working directly with clients. However, if your interests lie in assisting with general clerical duties, you may begin your volunteer experience sooner, with the understanding that you will be required to attend the next available training class offered.

Volunteers help in so many ways at New Beginning Center. If you're interested in giving back and making a difference, please contact me to set up an appointment at (972) 276-0423, Ext. #232. I look forward to working with you!

Sincerely,

Volunteer Coordinator

New Beginning Center Code Of Conduct and Volunteer Agreement

Code of Conduct

1. Smoking or use of tobacco products in the presence of clients of while volunteering is prohibited. Using, possessing, or being under the influence of alcohol or illegal drugs will not be tolerated.
2. Volunteers shall not abuse other volunteer clients, or staff, including but not limited to:
 - a) Physical Abuse-strikes, spansks, shake, slap, etc.
 - b) Verbal Abuse-humiliate, degrade, threaten
 - c) Sexual Abuse-including inappropriate remarks, touching, gestures, and/or exposure.
 - d) Mental Abuse-inconsistent standards, communicating one behavior and rewarding the opposite
3. Volunteers will treat other volunteers, clients, and staff of all races, religions and cultures with respect.
4. Volunteers shall not use profanity in the presence of other volunteers, clients, or staff.
5. Texas State Law requires that all citizens report any suspected abuse or neglect of a child, disabled, or elderly person to the Texas Department of Protective and Regulatory Services. Prior to making such a report, volunteers must seek New Beginning Center staff assistance.
6. Volunteers will exercise caution and discretion when acting on the Center's behalf in any situation.
7. Volunteers will not carry a weapon while on the Center's premises or while carrying out NBC volunteer's tasks.
8. The location of the shelter will be held confidential at all times.
9. New Beginning Center volunteers will not set value standards for crime victims and witnesses (for example, a battered woman or a child who saw his or her mother battered). Rather, support and information is presented to allow crime victims and witnesses to make their own decisions. Each victim and witness will be positively supported in her/his choices.

New Beginning Center-Volunteer Application

For Office Use Only	
NVO	_____
REF	_____
REF	By _____
OTHER	_____

Date _____

Personal Information

Last Name: _____ First Name _____ MI _____

Other Names Used _____ Reason(s) _____

Residence Address _____ City _____ Zip Code _____

Mailing Address _____ City _____ Zip Code _____

How long at the above address? _____ Home Phone (____) _____ Other (____) _____

Via Email _____ @ _____

How many times have you moved in the last seven years? _____

List 2 last residential address 1) _____ How long? _____

2) _____ How long? _____

In the event of a emergency, please notify _____

Emergency Contact phone number (____) _____ Relationship _____

Do you have any impairment that may limit your ability to perform the volunteer job applied for
YES NO If, Yes what can we do to accommodate you? _____

Occupation/Skills

Employer _____ Your Title _____

Address _____ City _____ Zip _____

Work# (____) _____ Fax # (____) _____ May we contact you at work Yes No

Are you bilingual? Yes No Languages _____

Formal training or experience related to our work _____

List other volunteer service _____

List all jobs and dates of employment in the last 5 years _____

Volunteer Positions (please choose no more than three areas of interest)

Court Ordered Community Service Volunteers may apply only for the resale shop position.

- Board Member Shelter Services Children's Services Fundraising BIPP Admin
 Hotline Public Relations Court Partnership Resale Shop Shelter
 Court Advocate Admin/Reception Speakers Bureau

HISTORY WITH THE LEGAL SYSTEM

Have you ever been arrested or convicted of a crime? Yes No

Please exclude the following situations: A) minor traffic violation for which the fine was \$200.00

B) any offense finally settled in Juvenile Court

If YES, to above question, please explain (dates, county, disposition) _____

Will your volunteer work be part of court ordered community service? Yes No

If Yes, # hours required _____ Date to be completed by _____

Probation Officer or court contact name _____ Phone _____

COMMUNITY SERVICE REQUIREMENTS

Do you need to complete a certain # of hours for class credit _____ or to meet the requirements of membership in an organization _____? (other than above mentioned court ordered restitution)

Organization _____ Contact _____ Phone () _____

Hours needed _____ Date to be completed by _____

REFERENCES- Please list three references, personal or business (not related to you)

Name	How Known?	How long?	Day Phone	Fax
1) _____				
2) _____				
3) _____				

I have completed and reviewed this entire form and attest that the information provided is true.

Applicant Signature _____ Date _____



Background Verification Release Form

AGENCY INFORMATION

Date	Agency Name		
Contact Name			
Agency's Main Phone Number		Agency's Fax Number	

APPLICANT INFORMATION:

Applicant Full Name (Last, First, MI)		Maiden or Other Name(s) Used	
Current Address			
City	State	Zip Code	County
Social Security Number	Date of Birth	Driver's License Number	State Issued
Position Applied For			
Gender	Race		
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Anglo <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		

I hereby authorize VERIFYI and or its Service Provider to request and receive any and all background information about or concerning me, including but not limited to my Criminal History, Social Security Number Trace including a consumer report under the Fair Credit Reporting Act, 15 U.S.C 1681, Driving Record, Employment History, Military Background, Civil Listings, Educational Background, Professional License from any Individual, Corporation, Partnership, Law Enforcement Agency, and other entities including my Present and Past Employers.

The criminal history, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct as committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/volunteer position with this organization. I also understand that as long as I remain an employee or volunteer here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by client/agency and a procedure is available for clarification, if I dispute the record as received. I also understand that the criminal history could contain information presumed to be expunged.

I further release and discharge VERIFYI and their Service Provider and all of their Subsidiaries, Affiliates, Officers, Employees, Contract Personnel, or Associates, from any and all claims and liability arising out of any request for information or records pursuant to this authorization, procurement of an investigative consumer report and understand that it may contain information about my character, general reputation, personal characteristics, and mode of living, whichever are applicable.

I understand that I have the right to make written request within a reasonable period of time to VERIFYI for additional information concerning the nature and scope of the investigation. I acknowledge that I have voluntarily provided the above information for employment/volunteer purposes, and I have carefully read and understand this authorization.

Applicant's Signature

Date

Applicant's Printed Name

Parent/Guardian's Signature
(if under 18 years of age)

New Beginning Center

Automatic Disqualifiers for Volunteer Service

The New Beginning Center will automatically disqualify any individual who has at any time:

- Been convicted of a felony or any offense that would be a felony if committed in the state of Texas.
- Used ("tried") marijuana in the past six months.
- Sold marijuana
- Been dishonorably discharged from the United States Armed Forces.
- Used ("tried") any dangerous drugs or narcotics including cocaine, crack, heroin, LSD, etc.
- Had a pattern of abusing prescription medication.
- Lied during any part of the volunteer selection and screening process.
- Falsified his/her questionnaire or application.

Discretionary Disqualifiers

The following disqualifiers may, upon review, make you ineligible for volunteer service with the New Beginning Center:

- A physical or mental disability that would substantially impair an individual's ability to perform his/her duties.
- Alcohol mis-use or abuse.
- Unlawful sexual conduct.
- Excessive traffic violations.
- Commission of a felony.
- Any discharge from the US Armed Forces other than an honorable discharge.
- Debts-a demonstrated unwillingness to honor fiscal responsibilities.
- Any other pattern of conduct that would tend to disrupt, diminish, or otherwise jeopardize public trust.

I have read and understand the above disqualifiers.

Applicant's Signature

Date

New Beginning Center Code of Ethics and Standards for Volunteers

- 1) Smoking or use of tobacco products in the presence of clients or while volunteering is prohibited.
- 2) Using, processing, or being under the influence of alcohol or illegal drugs will not be tolerated.
- 3) Volunteers shall not threaten or abuse other volunteers, clients, or staff, including but not limited to:
 - a) Physical Abuse- strike, spank, shake, slap, etc.
 - a) Verbal Abuse- humiliate degrade, threaten
 - b) Sexual Abuse- including inappropriate remarks, touching, gestures, and/or exposure.
 - c) Mental Abuse- inconsistent standards, communicating one behavior and rewarding the opposite.
- 4) Volunteers will treat other volunteers, clients, and staff of all races, religions, and cultures with respect and consideration.
- 5) Volunteers shall not use profanity in the presence of volunteers, clients, and staff.
- 6) Texas State law requires that all citizens report any suspected abuse or neglect of a child, disabled, or elderly person to the Texas Department of Protective and Regulatory Services. Prior to making such a report, volunteers must seek NBC staff assistance.
- 7) Volunteers will be prompt and reliable in reporting for scheduled work and fill out time sheets accurately. Volunteers will notify staff of changes in scheduling or any possible absence.
- 8) Volunteers will exercise caution when acting on the Center's behalf in any situation.
- 9) Volunteers will agree to recognize the confidentiality of all clients. Volunteers will not at any time or in any manner, directly or disclose to any individual(s) outside the New Beginning Center any information regarding clients or their participation in NBC's programs. Volunteers, when necessary, will only discuss a client's situation or needs only with appropriate NBC staff in a confidential setting.
- 10) Volunteers will not carry a weapon while on Center's premises or while carrying out NBC volunteer tasks.
- 11) The location of the shelter will be held confidential at all times.

Volunteer Signature _____ Date _____