Volunteer Application

Nashville International Center for Empowerment

Date:

Personal Information

Name: Phone:

Address:

Email:

Date of Birth:

Languages:

Emergency Contact (name, relationship to you, phone number):

Education (enter the number of years attended):

High School	College	Graduate School	Doctorate	Other (please explain)

Programs

Please list the volunteer opportunities that most interest you.

1.

2.

3.

Availability (Please specify times of availability in the space provided. Example: 9:00 a.m. -1:00 p.m.)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Date available to start:

Can you commit to volunteering for at least 4 months? ☐ Yes ☐ No

Are you volunteering to fulfill a credit requirement? ☐ Yes ☐ No

If yes, explain what you need the credit for and how many hours you need to complete.
(For example: 20 hours community service)

If yes, please provide contact information for your program supervisor.
Name: Phone: Email:

Please list/describe any other time commitments (school, work, volunteering, vacation, etc.):

Tell Us About You

Please describe any skills and experience that are relevant to your desired volunteer position:

Accommodations/Restrictions on volunteer activities:

Why do you want to volunteer with NICE?

How did you hear about us?

Please provide two references, not related to you, from a previous work or volunteer experience (if no prior experience, list personal references not related to you):

1. Name: Phone: Email:

How is this person related to you?

2. Name: Phone: Email:

How is this person related to you?

By signing this application, I acknowledge that I understand that there could be some risks and hazards involved with volunteering at the Nashville International Center for Empowerment (NICE). I willingly and freely agree to volunteer and agree to release NICE for all liability for such risk, including without limitation risk of any accident or injury to person or property which I may sustain in connection with my participation as a NICE volunteer or in any NICE related project or activity. I hereby release NICE and its directors, officers, partners, agents, employees, successors, assigns, licensees, sponsors, donors, representatives, guests and affiliates from and covenants not to sue NICE for, any and all claims and causes of action, whether known or unknown, arising out of, based upon or relating to my participation as a NICE volunteer or in any NICE related activity or project. I agree to abide by the policies and procedures presented to me during the volunteer training and as updated thereafter. I agree not to disclose information to (or about) participants, donors, employees, or volunteers to anyone unless my supervisor has approved divulging such information. I understand my volunteer assignment may be terminated at any time at the discretion of the Volunteer Coordinator or my supervisor. As a condition of being accepted as a volunteer with NICE, I agree to maintain a high degree of ethical standards and be law abiding in all respects. Should one be required, I agree to a background and/or reference checks to determine my suitability to volunteer at the NICE. I understand that, as a volunteer, I am representing the NICE (but I am not an employee) and will adhere to the guidelines set forth by the program. I understand that if I am unable to fulfill my duties as a volunteer, report for an assignment, or have any conflicts I will report any such problems to the Volunteer Coordinator as soon as possible.

Volunteer Signature: _____ **Date:** _____

If under age 18, a parent/legal guardian must please complete the following section:

I authorize my child to participate in the Nashville International Center for Empowerment's Volunteer Program. I understand that adult supervisors who may supervise my child may be volunteers and that the projects or activities will involve the normal level of risk associated with such a project or activity. I will inform the manager of volunteers of any particular physical, mental, social, or other condition of my child of which the Volunteer Coordinator should be aware. I agree that he/she will abide by any rules and direction provided by NICE staff or a representative of NICE. Should one be required, I agree to a background and/or reference checks to determine my child's suitability to volunteer at the NICE. I willingly and freely agree to allow my child to volunteer and hereby assume any and all risk, and agree to release NICE for all liability for such risk, including without limitation risk of any accident or injury to person or property which my child may sustain in connection with his/her participation as a NICE volunteer or in any NICE related project or activity. I hereby release NICE and its directors, officers, partners, agents, employees, successors, assigns, licensees, sponsors, donors, representatives, guests and affiliates from and covenants not to sue NICE for, any and all claims and causes of action, whether known or unknown, arising out of, based upon or relating to my child's participation as a NICE volunteer or in any NICE related activity or project.

Parent/Legal Guardian (Printed Name): _____

Parent/Legal Guardian Signature: _____ Phone #:( ) _____