**VOLUNTEER APPLICATION**

***GOODWILL INDUSTRIES OF MISSISSIPPI, INC.’S MISSION STATEMENT***

*Goodwill Industries of Mississippi, Inc.’s mission is to assist individuals with disabilities or other barriers to obtain employment.*

**First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**REASON(S) FOR VOLUNTEERING:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Gain Work Experience |  | Company Volunteer Program |  | Internship/School Program |
|  | Give Back to Community |  | Court-Related Requirement |  | Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | This is my Passion/Hobby |  | Benefits Requirement |
|  | Scholarship Requirement |  | Worker's Compensation |

**WHICH AREA(S) YOU ARE INTERESTED IN VOLUNTEERING:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Retail Sorter |  | Intern/Continuing Education |  | Special Events |
|  | Retail Hanger |  | Photographer |  | Language Translator |
|  | Retail Rubber Banding |  | Videographer |  | Computer Skills Assistant |
|  | Janitorial Services  |  | Graphic Design |  | Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Length of Volunteer Request**

Date of One-TimeVolunteer Request **\_\_\_\_\_\_\_\_\_\_\_ OR**

Beginning Date**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** End Date: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*Goodwill Industries of Mississippi, Inc.’s Approval of Volunteer:*

*Mission Services Department Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Signed: \_\_\_\_\_\_\_\_\_\_*

*Goodwill’s President & CEO Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date Signed: \_\_\_\_\_\_\_\_\_\_*

**VOLUNTEER RELEASE FORM AND AGREEMENT**

I am aware that volunteering with Goodwill Industries of Mississippi, Inc. involves risks of personal injury, property damage and other risks associated with volunteer service.

If requested, I understand that my volunteer application can be denied pending the results of a background check, which may take two to three weeks to be finalized.

I understand that I will not be compensated for my services as a volunteer.

I understand that Goodwill Industries of Mississippi, Inc. is not responsible or liable for my personal effects and property and that they will not provide lock up or offer security for any items.

By my signature, for myself, my estate and heirs, I release discharge, indemnify and forever hold Goodwill Industries of Mississippi, Inc., its employees and Board of Directors harmless from any claims and/or causes of action arising from participation as a volunteer and travel associated therewith.

Mississippi statutes excludes unpaid volunteers from Worker’s Compensation coverage. I understand that I will NOT be covered under Goodwill Industries of Mississippi, Inc.’s Worker’s Compensation insurance while performing as a volunteer.

In the event that I am injured, I consent to administration of first aid and other medical treatment and agree to pay the costs of any such treatment.

I understand that I am to abide by whatever policies, rules and regulations currently are in effect at Goodwill Industries of Mississippi, Inc., and they can end the volunteer relationship at any time without notice.

I understand that any confidential information to which I have access is privileged and shall be held in strict confidence. I understand that any violation of the confidentiality of such information may result in termination of my volunteering with Goodwill Industries of Mississippi, Inc.

I give Goodwill Industries of Mississippi, Inc. permission to photograph me as it relates to my volunteer work.  I understand that the organization has permission to use these photographs/videotapes for publicity purposes.

By signing, I acknowledge that I have carefully read and fully understand the information, and I am voluntarily signing this agreement between myself and Goodwill Industries of Mississippi, Inc. of my own free act.

**Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent or Guardian Signature (18 and under):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**VOLUNTEER LOG**

**Volunteer’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Volunteer’s Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |
| --- | --- | --- | --- |
| **DATE** | **TIME IN** | **TIME OUT** | **TOTAL HOURS** |
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**Total Volunteer Hours: \_\_\_\_\_\_\_\_\_**

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