



# Volunteer Application

**Please contact IVC NEPA Regional Director Teddy Michel with questions:**

(570) 941-4264

[jmichel@ivcusa.org](mailto:jmichel@ivcusa.org)

Name:

Address:

Email:

Preferred Phone:

Alternate:

Preferred means (email or telephone) and time to contact:

Date of Birth (Month and Day only):

Please bold your response to the question below if completing on a computer:

Married  Single  Separated or divorced  Widowed

If married what is your spouse's name?

If married how does your spouse feel about your participation in IVC?

Primary Emergency Contact:

Relationship:

Emergency Contact Phone Number:

Alternate Emergency Contact:

Relationship:

Emergency Contact Phone Number:

Religion:

Place of Worship:

Please bold your response to the question below if completing on a computer:

What is your work status?  Retired  working part time/semi-retired  working full time

**If you possess a resume, please attached it to this application. If you do not possess a resume, please briefly describe your educational, work, and volunteer history, including any education, work or volunteer experiences at Jesuit Institutions below.**

Please bold your response to the question below if completing on a computer:

Are you willing to have IVC share your resume and/or educational, professional, and volunteer experiences with potential service sites?

yes  no

How did you first learn of IVC?

Please list any organizations in which you currently volunteer your, position there & length of service

**Volunteer Questionnaire (1-3 sentence responses please):**

1. Why do you want to join the Ignatian Volunteer Corps?
2. What strengths do you bring to IVC?
3. In what areas would you like to grow?
4. What types of volunteer work are you interested in doing with IVC?
5. What skills do you have that you might like to use as an IVC volunteer? Feel free to include hobbies, domestic talents, languages, artistic, musical, or athletic abilities.
6. What experience have you had with people of cultures other than your own?
7. Are there any medical/psychological conditions that might affect your service? (Your response will be kept confidential and will not exclude you from consideration for IVC.).
8. Are there any limitations or preferences regarding travel to and from volunteer sites or IVC events? (i.e., prefer certain geographical locations; can't drive at night; etc.).

Please bold your response to the question below if completing on a computer:

Do you require any special accommodations that the coordinator of volunteers should be aware of?

Yes       No

If yes, please describe:

## Safe Environment Training Questions:

1. Have you participated in a 'Safe Environment' training program (e.g. STAND, VIRTUS, etc...)?
2. If yes, who holds your records concerning this training?
3. Have you ever had a criminal history background check?
4. If Yes, in what year?

IVC's policy requires all volunteer applicants to complete a criminal background check prior to acceptance as a volunteer. Thus, you will be asked to give permission to the agency or IVC to perform a background check.

Additionally, many IVC partner organizations may ask volunteers to comply with their own volunteer application process. As such, Ignatian Volunteers may be asked to participate in a training program, and will likely be asked the following questions:

*Have you ever been convicted of a criminal offense?*

*Have you ever been charged with neglect, abuse or assault?*

*Do you use illegal drugs?*

*Has your driver's license ever been suspended or revoked in any state?*

Please check this box to indicate that you have been informed of this and will consent to a background check. *It is IVC's policy that all volunteer applicants are required to have a background check before acceptance as a volunteer. This information may be used to reject an applicant.*

*\*Certificate of Ability: Any potential volunteers who indicate that they are under the care of a physician for any physical or psychological ailment which might impede their ability to work may be asked to present a certificate from the physician as to their ability to satisfactorily and safely perform their duties. Any volunteer who, after accepting an assignment with an IVC partner nonprofit or with IVC itself, enters a course of treatment which might adversely impact upon the performance of their volunteer duties should consult with their Regional Director.*

**References:**

Please list two references who we may contact. Both should be able to assess your general character and suitability for IVC. One should be able to reflect on your work or community experience, and the other on your spiritual motivation.

Work/Community Reference:

Telephone:

Spiritual Reference:

Telephone:

**Membership Commitment:**

Membership in the IVC requires a commitment to both volunteer service among the materially poor and an openness to deepening your own spiritual life. Membership runs from September through June of the following year. Considering this requirement, are you willing to commit to the following:

**(Please type or write “yes” or “no”).**

1. Make a one-year commitment to serve the materially poor one or two days a week (or equivalent hours) at an IVC-affiliated service site?
2. Make every effort to join monthly with other IVC members for prayer, conversation, and reflection on your work?
3. Be open to deepening your own spiritual growth through individual monthly meetings with an IVC spiritual reflector?

- 4. Make every effort to attend any overnight retreats or day of reflection?
  
- 5. Be willing to abide by the policies and procedures of the service site at which you choose to work?

**IVC DOES NOT provide a stipend or salary remuneration.** Please indicate whether this may preclude you from volunteering with the Ignatian Volunteer Corps. Please bold your response to this question if completing on a computer:

Yes                       No

Feel free to comment on your ability to fulfill any of the above requirements.

From time to time, IVC may take photos for marketing purposes. Please check (or type in “YES” or “NO” if completing on a computer) that you agree with the following statement:

I hereby grant my consent to the Ignatian Volunteer Corps copyright and publication rights of my photograph and image. I understand that this photo may be used in multiple media including; print, video, and website media. I further grant the Ignatian Volunteer Corps, its assignees, contractors, licensees, sponsors, and transferees the right to print my name with the photograph/image.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Authorization and Certification**

I certify that the information I provided in this application is true, complete, and accurate to the best of my knowledge. I also authorize IVC to contact the references named below regarding my application to become an IVC volunteer. I also authorize the persons referenced to provide information pertaining to my application, and release them from any liability regarding it.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_