



"...whoever is kind to the needy honors God."

Proverbs 14:31

Welcome to the Salina Rescue Mission

Thank you for your interest in volunteering at the Salina Rescue Mission. Our ambition is to give more than the basic needs. Our mission statement reads: **to provide Christian ministry to persons in need of food, shelter, clothing, or other basic needs, and to rehabilitate through teaching the Gospel of Jesus Christ.** We could not fulfill this mission without the efforts of volunteers such as you.

We would ask that you fill out the attached **Volunteer Application**. There are a couple of reasons for this request. First, we want to find the best fit for you within our Volunteer Program. Your answers to the questions in the application will help us to find the best place for you to help us fulfill our mission. Second, we need some personal information (such as birth date and middle name) to ensure safety for you and for our clients.

Also, please read the **Volunteer Rights and Responsibilities**, which is enclosed. Sign and date where indicated and return it with your application.

Again, we thank you for the interest you have shown and look forward to working with you as we serve the poor, hungry and homeless in our community.

A handwritten signature in black ink that reads "Chad Young". The signature is written in a cursive, flowing style.

Chad Young
Executive Director

Volunteer Application

- **Basic Information** (Please Print)

Today's Date: _____

Name (First, Middle, Last) D.O.B Gender (Male or Female)

Address (Street, City)

Address (State, Zip code)

Home Phone Cell Phone E-mail address

What is your preferred contact method? (Phone, email, letter) _____

- **Emergency Contact**

Name (First, Middle, Last) D.O.B Gender (Male or Female)

Address (Street, City)

Address (State, Zip code) Relation to you

Home Phone Cell Phone E-mail address

- **Additional Information**

Present Employer Occupation Job Title

Past Employment Experience (What else have you done?)

Religious Background Current Church Pastor

- **Previous Volunteer Experience** (if any)

Name of Organization

Supervisor

Volunteer Work Done

- **Motivations**

How did you hear about the Salina Rescue Mission?

Why would you like to volunteer at the Salina Rescue Mission?

What skills, gifts, or experience could you contribute?

- **Personal History**

Do you have limitations or medical conditions we should be aware of? No Yes

If yes, please list. _____

Have you ever been convicted of a felony? No Yes

If yes, please list. _____

- **References**

1. Name _____ Phone Number _____

Years known _____ Relationship to you _____

2. Name _____ Phone Number _____

Years known _____ Relationship to you _____

- **Commitment**

What type of commitment can you offer? One-time Once in a while Ongoing

Please Explain:

I hereby state that all information I have supplied on this application is true to the best of my knowledge. I give the Salina Rescue Mission permission to contact any of the references I have provided. I have read the SRM Rights and Responsibilities and I agree to conduct myself according to them.

Signed _____ Date _____

Volunteer Coordinator Signature _____



He who is kind to the poor lends to the Lord,
and He will reward him for what he has done.
Proverbs 19:17

Volunteer Rights and Responsibilities

As a volunteer with the Salina Rescue Mission, you have the right to:

- Be empowered and equipped to accomplish your ministry opportunity
- Give feedback in the form of an evaluation
- A safe and comfortable work environment
- Give input by partnering with us in our ministry
- Ask to change or terminate your ministry activity
- Be provided the training that you need to succeed in your ministry
- As a volunteer with the Salina Rescue Mission, you have the responsibility to:
 - Be punctual and conscientious (If you are unable to fulfill your commitment please notify the office at least 24 hours in advance)
 - Sign-in and out of each scheduled volunteer activity
 - Dress in a manner that is modest and appropriate. Please refrain from wearing tank-tops, midriff tops, shorts, and any clothing that is: tight, low-cut or has lewd or indecent imprints on it. If you are dressed inappropriately, we will provide you with proper attire or you may reschedule.
 - Keep all information that is obtained directly or indirectly concerning clients and staff, absolutely confidential.
 - Complete assignments and seek the direction of the supervisor when necessary.
 - Fill out an evaluation of the assignment under completion.
 - Conduct oneself in a manner consistent with impeccable moral, ethical, and interpersonal standards.
 - Be wise! We want volunteers to get to know SRM shelter guests; however, be aware of being too gullible. Many times, people who are disadvantaged have learned to survive by becoming adept at using others. With that in mind please follow these guidelines:
 - Do not give money to anyone.
 - Do not give rides to anyone.
 - Do not give personal information, such as telephone number or address without first checking with staff.
 - Never be alone with anyone of the opposite gender.
 - Do not leave personal belongings unattended.
 - Do not make any decisions for the shelter guests; instead refer them to staff.
 - Do not date shelter guests.
- Take any problems, criticism or suggestions to your supervisor or to the Operations Director.
- Contribute to the overall purpose of the Salina Rescue Mission. We are here to provide the poor and homeless with physical necessities as well as help our neighbors physically, emotionally, and educationally.
- Do not commit to more than you can deliver. Remember, we are counting on you to follow through with what you promise.
- The Salina Rescue Mission is a faith-based organization. Men come to the SRM from various doctrinal backgrounds, in respecting these differences, we encourage all volunteers to avoid promoting, teaching or sharing personal doctrines of faith. If a volunteer persists in promoting their personal beliefs or doctrines, they may be asked to forfeit their involvements with the SRM.
- In consideration of being granted permission to volunteer with the Salina Rescue Mission, I release the Salina Rescue Mission, its separate entities, agents, employees, and officers from any injury claims, at any time, related to my volunteer work.
- I further agree to indemnify the Salina Rescue Mission and/or any of its separate entities against all claims, demands, judgements, and executions that the Salina Rescue Mission and/or its separate entities may sustain arising from my volunteer actions, whether or not such claims, demands, judgements, and executions are discovered during my volunteer work.

Volunteer Signature

Date

PRIVACY, CONFIDENTIALITY AND SECURITY AGREEMENT POLICY

The **Salina Rescue Mission (SRM)** is committed to ensuring our organization complies with relevant privacy, confidentiality and security legislation in order to protect our clients, our staff and our organization. To facilitate this, individuals are required to understand their obligations and responsibilities including what it means to sign this agreement.

All persons, including Salina Rescue Mission staff, volunteers, interns and contractors who come into contact with, or have access to, confidential information have a responsibility to maintain the privacy, confidentiality and security of that information.

In your job you may see or hear confidential information in any form (oral, written, electronic). Any information that is private or sensitive in nature is to be considered confidential. Confidential information should not be read or discussed by any employee unless pertaining to his or her specific job requirements. Confidential information may include, but is not limited to, information relating to:

- Clients and/or Family Members
- *Such as medical records, health status, conversations and financial information*
- Employees, Volunteers, Contractors
- *Such as salaries, employment records, disciplinary actions, health status*
- Business Information
- *Such as financial records, donor records, reports, memos, contracts, computer programs, technology*
- Third Parties
- *Such as vendor contracts, computer programs, technology*
- Operations Improvement, Quality Assurance, Peer Review
- *Such as reports, presentations, survey results*

I AGREE TO AND ACKNOWLEDGE THE FOLLOWING:

- I will protect the privacy of all personal, medical and financial information relating to our clients.
- I will protect the privacy of all personal, medical and financial information relating to our staff, volunteers, interns, donors and contractors.
- I will protect the privacy of all business information relating to the Salina Rescue Mission.
- I will not misuse confidential information and will only access the information that is necessary to do my job. I will not disclose any confidential information unless required to do so in the official capacity of my employment, relationship or contract with SRM.
- I will not share, change or destroy any confidential information unless it is part of my job to do so. If any of these tasks (such as shredding confidential paper) are part of my job, I will follow the correct department procedure, or the instructions of my supervisor. If a demand from a law enforcement or government agency is made of me to disclose confidential information, I will document this by giving written notice to my supervisor.
- I will only print or copy information from the SRM information system when it is necessary for a legitimate work related purpose. I am accountable for this information until it is properly filed or disposed of.
- If I have access to electronic equipment and/or records, I will keep my computer password secret and I will not share it with any unauthorized individual. I am responsible to protect my password or other access to confidential information. I understand that my use of any electronic system may be periodically monitored and audited to ensure compliance with this agreement.

- I understand that I have an obligation to report to my supervisor if I think someone is misusing confidential information or is using my password. I further understand that SRM will not tolerate any retaliation against me for making a report.
- On termination of my employment, I will return to SRM all copies of documents containing confidential information or data in my possession or control.

I hereby acknowledge, by my signature below, that I understand that the confidential records and data to which I have knowledge and access in the course of my employment, or relationship, with the Salina Rescue Mission are to be kept confidential. I understand that my duty to maintain confidentiality continues even after I am no longer employed.

I understand that failure to comply with this agreement may result in corrective action up to, and including, termination of employment or other relationships with the Salina Rescue Mission. Unauthorized use or release of confidential information may also subject the violator to personal, civil, and/or criminal liability and legal penalties.

I have read this statement and understand that it will remain on file for the duration of my employment, or relationship, with the Salina Rescue Mission.

Date _____

Employee Volunteer Other

Printed Name _____

Signature _____

Supervisor _____

Salina Rescue Mission
1716 Summers Rd Salina KS 67401
785-823-2610
Media Release Form

I hereby authorize the Salina Rescue Mission (SRM) and parties designated by SRM the irrevocable right to use my likeness, image, voice, and/or appearance as captured by photographic, audio and/or video means (Media) for release and/or reproduction in any medium for any legal purpose.

I acknowledge that I have no interest or ownership in the Media or the copyright in the Media, and that any use of the Media may be made without compensation or notice to me. I waive any right to inspect, approve, and/or otherwise control the use of the Media.

SRM will not publish my name, address, telephone number or email address with any Media without my specific permission to do so.

Name (please print)

Signature of Responsible Party

Date

Witnessed by

Date

Relationship to Subject