# Jonnycake Center of Westerly Volunteer Application

Contact the Volunteer Office at **401-377-8069 x114** or **volunteer@jonnycake.org**

**Today’s Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Middle Initial\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_State:\_\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Primary Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Alternate Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Why are you interested in volunteering at the Jonnycake Center?*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***How did you hear about volunteering at the Jonnycake Center?*** ***Please circle.***

Word of mouth Facebook Referral Newspaper Email Other: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

***Any special skills or interests?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***Do you have any medical conditions we need to be aware of?*** YES NO *If yes, please* ***explain\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

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

***In which area(s) would you be interested in volunteering? Please circle.****Thrift Store (Clothes/Merchandise Sorting, Arranging/ Stocking Store) Office**Food Pantry*

***Availability*** ***during Store Hours***

Store Hours: Monday, Tuesday, Wednesday, Friday, & Saturday: 9am-4pm | Thursday: 9am-6pm | Sunday 10am-2pm  
Please note the days/hours you are able to volunteer: We request a minimum of two hours.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Are you required to complete community service?*** Circle one: YES NO If yes, required hours: \_\_\_\_\_\_\_\_\_

Deadline required for completion: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Community Service: Academic (school name) \_\_\_\_\_\_\_\_\_\_\_\_ Church (church name)\_\_\_\_\_\_\_\_\_\_\_ Court Ordered

**COURT ORDERED COMMUNITY SERVICE:**

If volunteering is court ordered, please explain the offense:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever been convicted of a Felony: [ ] Yes [ ] No Misdemeanor [ ] Yes [ ] No

If yes, explain number of conviction(s), nature of offense(s) leading to conviction(s), when and where such offense(s) was/were committed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Certain offenses may disqualify you to complete your community service requirement at the Jonnycake Center and must be approved in advance. Volunteering for court ordered community service is more structured than the regular volunteer program and typically involves cleaning and maintenance tasks.

CONFIDENTIALIY AND DISCLOSURE STATEMENT

The undersigned agrees to prevent unauthorized use or dissemination of any confidential information reported to The Jonnycake Center of Westerly. Confidential information is defined as written or oral information disclosed to staff/volunteers specifically related to the population served (clients, donors, or other collaborative agencies). Violation of confidentiality laws may result in termination of volunteer relationships and/or other penalties including legal actions.

Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CRIMINAL RECORD CHECK CONSENT**

I authorize the release of any personal criminal information or data from the Westerly Police Department or from the State of Rhode Island/Connecticut with regard to myself. This record may be released to the Jonnycake Center of Westerly only for determination of suitability for a volunteer position and capacity.

Print Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Office Use Only*

[ ] Reviewed [ ] Completed background check [ ] Contacted [ ] Completed Orientation [ ] Placed

Work Area\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Days/Hours\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**JONNYCAKE CENTER OF WESTERLY**

*A Non-Profit Charitable 501(c)(3) Organization*

*23 Industrial Drive Westerly, RI 02891 401-377-8069 www.jonnycake.org*

**RELEASE AND WAIVER OF LIABILITY**

***PLEASE READ CAREFULLY: THIS IS A LEGAL DOCUMENT THAT AFFECTS YOUR LEGAL RIGHTS!***

This Release and Waiver of Liability (the “Release”) executed on this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_\_\_, by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (the “**VOLUNTEER**”) in favor of the Jonnycake Center of Westerly, a non-profit corporation, and its directors, officers, employees, and agents.

The **VOLUNTEER** desires to work as a **VOLUNTEER** for the Jonnycake Center of Westerly and engage in the Activities related to being a **VOLUNTEER** in the Thrift Store, Food Pantry, or other special activities or events (Activities). The **VOLUNTEER** understands that the Activities may include lifting/carrying/moving furniture and other donated items, loading/unloading delivery vehicles in the Thrift Store and Food Pantry, stocking shelves in the Thrift Store and Food Pantry, and working in the sorting rooms and office spaces.  
  
The **VOLUNTEER** hereby freely, voluntarily, and without duress executes this Release under the following terms:  
  
1. **RELEASE AND WAIVER**. **VOLUNTEER** does hereby release and forever discharge and hold harmless the Jonnycake Center of Westerly and its successors and assigns from any and all liability, claims, and demands of whatever kind or nature, either in law or in equity that arise or may hereafter arise from said **VOLUNTEER** Activities with the Jonnycake Center of Westerly.

**VOLUNTEER** understands that this Release discharges the Jonnycake Center of Westerly from any liability or claim that the **VOLUNTEER** may have against the Jonnycake Center of Westerly with respect to any bodily injury, personal injury, illness, death, or property damage that may result from said **VOLUNTEER’S** Activities in the Jonnycake Center of Westerly, whether caused by the negligence of The Jonnycake Center of Westerly or its officers, directors, employees, or agents or otherwise. **VOLUNTEER** also understands that the Jonnycake Center of Westerly does not assume any responsibility for or obligation to provide financial assistance or other assistance, including, but not limited to, medical, health, or disability insurance in the event of injury or illness.

2. **MEDICAL TREATMENT**. **VOLUNTEER** does hereby release and forever discharge the Jonnycake Center of Westerly from any claim whatsoever which arises or may hereafter arise on account of any first aid, treatment, or service rendered in connection with the said **VOLUNTEER’S** Activities with the Jonnycake Center of Westerly.

3. **ASSUMPTION OF THE RISK**. The **VOLUNTEER** understands that the Activities may involve work that may be hazardous to the **VOLUNTEER**, including, but not limited to, lifting/carrying/

moving furniture and other donated items, loading/unloading delivery vehicles in the Thrift Store and Food Pantry, stocking shelves in the Thrift Store and Food Pantry, working in the sorting rooms and office spaces, and transportation to and from the work sites. **VOLUNTEER** hereby expressly and specifically assumes the risk of injury or harm in the Activities, and releases the Jonnycake Center of Westerly from all liability for injury, illness, death, or property damage resulting from the Activities.  
  
4. **INSURANCE**. The **VOLUNTEER** understands that, except as otherwise agreed to by the Jonnycake Center of Westerly in writing, the Jonnycake Center of Westerly does not carry or maintain health, medical, or disability insurance coverage for any **VOLUNTEER**. Each **VOLUNTEER** is expected and encouraged to obtain his or her own medical or health insurance coverage.  
  
5. **PHOTOGRAPHIC RELEASE**. **VOLUNTEER** does hereby grant and convey unto the Jonnycake Center of Westerly all rights, title, and interest in any and all photographic images and video and/or audio recordings made by the Jonnycake Center of Westerly during the said **VOLUNTEER’S** Activities with the Jonnycake Center of Westerly including, but not limited to, any royalties, proceeds, or other benefits derived from such photographs or recordings.  
  
6. **OTHER**. **VOLUNTEER** expressly agrees that this Release is intended to be as broad and inclusive as permitted by the laws of the State of Rhode Island, and that this Release shall be governed by and interpreted in accordance with the laws of the State of Rhode Island. **VOLUNTEER** also agrees that in the event that any clause or provision of this Release shall be held to be invalid by any court of competent jurisdiction, the invalidity of such clause or provision shall not otherwise affect the remaining provisions of this Release which shall continue to be enforceable.  
  
In witness whereof, **VOLUNTEER** has executed this Release as of the day and year written above.

**Volunteer Signature Witness**

***If under 18 years of age, parent or guardian must sign:***

***Parent/Guardian Signature:***

***Parent/Guardian Print Name:***

Rev: Feb. 2020



From: Heather Vultee, Store Manager

To: Employees and Volunteers:

According to Personnel Policy 403, “For their own protection and the reputation of the Jonnycake Center, employees or volunteers leaving the Center after their shift, must offer their bag(s) to a Supervisor for inspection. “

At this time, it is my expectation that both employees and volunteers adhere to this policy. In an effort to better protect the reputation of the organization, we are going to actively implement bag checking. Handbags should not be kept in active store or triage spaces. There should be no bags behind the register, in the clothing room, or in triage. There are lockers next to the classroom, in the back office in which you may store your bags. Six lockers have locks provided for daily use and are available on a first come first serve basis. You may bring your own lock if you choose. Using lockers protects our employees and volunteers from any accidental appropriation of their belongings as well as protects the Center from the appearance of employees and volunteers having the opportunity for the unprofessional acquisition of goods.

Before leaving the building at any time (for breaks, for lunch, at the end of day, etc.), employees and volunteers MUST provide their open bags for inspection to Heather, Sue, Sue, Kathy or Gretchen. If you prefer not to open your bag, please choose to bring only small necessary items (keys, license, etc.) and keep them on your person.

Please sign that you have received and understand this memo.

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I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, have received and read the memo regarding bag checks.

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



***COMMUNITY SERVICE VOLUNTEER GUIDELINES***

You have elected to perform your community service volunteer hours at the Jonnycake Center of Westerly. In order to successfully complete your required hours at the Center, you will have to adhere to the following guidelines:

1. The Jonnycake Center of Westerly is a place of business and you are here to work and support its mission. You are expected to complete duties in a professional and thorough manner.
2. You must sign in and out on the appropriate log, ensure date, time-in and time-out are accurate and completed. **This sign-in sheet is the official record and you will not be given credit for your hours if the log is not completed properly!** Upon completion of hours you will be provided a letter verifying how many hours you volunteered.Please give the volunteer coordinator notice when you are close to finishing hours so a letter can be prepared.
3. Duties/work assignments:
   1. As a community service volunteer you will most likely be responsible to clean the various areas throughout the Jonnycake Center of Westerly. A list of these duties is on the reverse side. After an orientation you will be expected to perform the tasks independently, with minimal supervision. If you are working in the thrift store you will report to the thrift store manager for your assignments.
   2. If you are working in the pantry you will report to the pantry manager.
   3. Name tags, located by the sign-in sheet, must be worn at all times.
4. In most areas of the Jonnycake Center you will be in contact with the general public who are shopping in the store or obtaining services through the social services office. As such you must always maintain a professional demeanor. This means no use of cell phones, texting, or having on headphones and no foul language.
5. You are not authorized to shop in the Thrift Store during you shift. You can only purchase items that are on the sales floor before or after your shift and all purchases must be approved by the store manager.

**Failure to comply with these guidelines will result in your dismissal.**

Printed name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_