

# Volunteer Application



**MALIVAI WASHINGTON**  
**YOUTH FOUNDATION**

SERVING HOPE | CHANGING LIVES

***Check us out on the following social media outlets  
for the most up to date info on MWYF! Search Love MWYF***



Please fax or return this application to:

**MaliVai Washington Youth Foundation**

1096 West 6<sup>th</sup> Street\*Jacksonville, FL 32209

(904)359-KIDS (5437) Ph (904)301-3789 Fax

***For more information or to sign up for a volunteer opportunity, email  
Jasmine@malwashington.com.***

www.malwashington.com



**ONGOING VOLUNTEER APPLICATION**  
**(Mentor/small group tutor/summer camp)**

**GENERAL INFORMATION**

First Name: \_\_\_\_\_ MI: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/ST/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender:  Male  Female

**EMERGENCY CONTACT INFO**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

**EMPLOYMENT INFO** Please list current or most recent place of employment (or school if you are a High School Student)

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Supervisor: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\*  
\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

*(parent signature required if under 18)*



## **Mentor/Match Information**

Name: \_\_\_\_\_

Best Phone Number to Reach You: (\_\_\_\_) \_\_\_\_\_

1. I would like to mentor/ volunteer \_\_\_\_\_ day(s) per week.
2. Please list in order your preference for days to mentor (#1 being 1<sup>st</sup> choice, #2 being 2<sup>nd</sup> choice, **X** being absolutely unavailable)  
\_\_\_\_ Monday  
\_\_\_\_ Tuesday  
\_\_\_\_ Wednesday  
\_\_\_\_ Thursday
3. I would like to mentor at (please check one): \_\_\_\_\_ 3:30-4:30 \_\_\_\_\_ 4:30-5:30 \_\_\_\_\_ Both (two sessions)
4. I would prefer to work with:  
\_\_\_\_ K-2                      \_\_\_\_\_ 3-5                      \_\_\_\_\_ Where you need me the most
5. I would prefer to mentor:  
\_\_\_\_ Boy                      \_\_\_\_\_ Girl                      \_\_\_\_\_ Where you need me the most
6. If available, please match me with the following mentee(s):  
Name: \_\_\_\_\_                      Name: \_\_\_\_\_

\*Tennis volunteers: complete questions 1-3 only.



## **MENTOR CODE OF ETHICS**

- Smoking or the use of tobacco products in the presence of children is prohibited.
- Using, possessing, or being under the influence of alcohol or illegal drugs will not be tolerated.
- Volunteers shall not abuse children including:
  - Physical Abuse: strike, spank, slap
  - Verbal Abuse: humiliate, degrade, threaten
  - Sexual Abuse: including inappropriate touching and exposure
  - Mental Abuse
- Volunteers must treat children of all races, religions, and cultures with respect and consideration.
- Volunteers must use positive techniques of guidance including positive reinforcement and encouragement rather than comparison or criticism.
- Volunteers shall abstain from humiliating or frightening discipline techniques.
- Volunteers shall not use profanity in the presence of children or parents.
- Volunteers will refrain from intimate displays of affection towards others in the presence of children and parents.
- Monetary and expensive gifts to volunteers (and students) are prohibited.
- Volunteers must be free of physical and psychological conditions that might adversely affect children's health, including fever or contagious conditions.
- Volunteers will portray positive role models for youth by maintaining an attitude of respect, loyalty, patience, integrity, courtesy, tact and maturity.
- Volunteers will do everything in their power to avoid being put in a dangerous situation where they are alone with a MWYF child other than their own and volunteers must receive written permission to participate in activities outside of MWYF activities with MWYF youth.
- Florida state law requires that all citizens report any suspected abuse or neglect of a child to the Florida Department of HRS. Please notify the most senior staff member on the site immediately of any suspected abuse.
- Volunteers will be subjected to a background check, including criminal history.
- Any violations of the Volunteers Code of Ethics will be grounds for my removal as a volunteer.
- I have been informed of MWYF's position regarding child abuse. I understand MWYF will, among other things, conduct a thorough check of my background, and conduct periodic interviews/evaluations with children and parents to encourage reports of anything out of the ordinary.
- I understand that allegations of suspicions of child abuse are taken very seriously by MWYF and will be reported to the State for investigation. MWYF will fully cooperate with any related investigations and will pursue the prosecution of child abusers to the full extent under the laws of this State.

I understand that and violation of this Code of Ethics may be grounds for removal as a volunteer of the MaliVai Washington Youth Foundation. Being fully aware of the matters contained in this Volunteer Code of Ethics, I still desire consideration as a volunteer for MWYF.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

## **PUBLIC RELATIONS RELEASE**

I give my consent for the MaliVai Washington Youth Foundation to use my name and photographs/video of me involved in MaliVai Washington Youth Foundation activities (either on or offsite) at any time for editorial, illustration, promotional, advertising, media coverage and/or other similar purposes in connection with any publication or activity as part of the MaliVai Washington Youth Foundation. I agree to allow my name and/or photography to be used on Facebook, other social media websites, or the foundation's website. I also give my consent to be interviewed by the media regarding my participation in MWYF programs. I also understand that the MaliVai Washington Youth Foundation may release photos of myself to partner organizations, funders, media, etc, for use in their promotional materials as well as allow them to take promotional photos/videos.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date



# CHILD CARE AFFIDAVIT OF GOOD MORAL CHARACTER

**\*Only complete  
if you are 18  
or older\***

State of Florida

County of Duval

Before me this day personally appeared \_\_\_\_\_ who, being duly sworn, deposes and says:  
(Applicant's/Employee's Name)

As an applicant for employment with, an employee of, a volunteer for, or an applicant to volunteer with MaliVai Washington Youth Foundation, I affirm and attest under penalty of perjury that I meet the moral character requirements for employment, as required by Chapter 435 Florida Statutes in that:

I have not been arrested with disposition pending or found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to, or have been adjudicated delinquent and the record has not been sealed or expunged for, any offense prohibited under any of the following provisions of the Florida Statutes or under any similar statute of another jurisdiction for any of the offenses listed below:

**Relating to:**

- Section 393.135 sexual misconduct with certain developmentally disabled clients and reporting of such sexual misconduct
- Section 394.4593 sexual misconduct with certain mental health patients and reporting of such sexual misconduct
- Section 415.111 adult abuse, neglect, or exploitation of aged persons or disabled adults or failure to report of such abuse
- Section 741.28 criminal offenses that constitute domestic violence, whether committed in Florida or another jurisdiction
- Section 782.04 murder
- Section 782.07 manslaughter, aggravated manslaughter of an elderly person or disabled adult, or aggravated manslaughter of a child
- Section 782.071 vehicular homicide
- Section 782.09 killing an unborn quick child by injury to the mother
- Chapter 784 assault, battery, and culpable negligence, if the offense was a felony
- Section 784.011 assault, if the victim of offense was a minor
- Section 784.03 battery, if the victim of offense was a minor
- Section 787.01 kidnapping
- Section 787.02 false imprisonment
- Section 787.025 luring or enticing a child
- Section 787.04(2) taking, enticing, or removing a child beyond the state limits with criminal intent pending custody proceeding
- Section 787.04(3) carrying a child beyond the state lines with criminal intent to avoid producing a child at a custody hearing or delivering the child to the designated person
  - exhibiting firearms or weapons within 1,000 feet of a school
- Section 790.115(1) possessing an electric weapon or device, destructive device, or other weapon on school property
- Section 790.115(2) (b) sexual battery
- Section 794.011 prohibited acts of persons in familial or custodial authority
- Section 794.05 unlawful sexual activity with certain minors
- Chapter 796 prostitution
- Section 798.02 lewd and lascivious behavior
- Chapter 800 lewdness and indecent exposure
- Section 806.01 arson
- Section 810.02 burglary
- Section 810.14 voyeurism, if the offense is a felony
- Section 810.145 video voyeurism, if the offense is a felony
- Chapter 812 theft and/or robbery and related crimes, if a felony offense
- Section 817.563 fraudulent sale of controlled substances, if the offense was a felony
- Section 825.102 abuse, aggravated abuse, or neglect of an elderly person or disabled adult
- Section 825.1025 lewd or lascivious offenses committed upon or in the presence of an elderly person or disabled adult
- Section 825.103 exploitation of disabled adults or elderly persons, if the offense was a felony
- Section 826.04 incest
- Section 827.03 child abuse, aggravated child abuse, or neglect of a child
- Section 827.04 contributing to the delinquency or dependency of a child
- Former Section 827.05 negligent treatment of children
- Section 827.071 sexual performance by a child
- Section 843.01 resisting arrest with violence
- Section 843.025 depriving a law enforcement, correctional, or correctional probation officer means of protection or communication
- Section 843.12 aiding in an escape
- Section 843.13 aiding in the escape of juvenile inmates in correctional institution
- Chapter 847 obscene literature

Section 874.05(1)	encouraging or recruiting another to join a criminal gang
Chapter 893	drug abuse prevention and control only if the offense was a felony or if any other person involved in the offense was a minor
Section 916.1075	sexual misconduct with certain forensic clients and reporting of such sexual conduct
Section 944.35(3)	inflicting cruel or inhuman treatment on an inmate resulting in great bodily harm
Section 944.40	escape
Section 944.46	harboring, concealing, or aiding an escaped prisoner
Section 944.47	introduction of contraband into a correctional facility
Section 985.701	sexual misconduct in juvenile justice programs
Section 985.711	contraband introduced into detention facilities

I understand that I must acknowledge the existence of any applicable criminal record relating to the above lists of offenses including those under any similar statute of another jurisdiction, regardless of whether or not those records have been sealed or expunged. Further, I understand that, while employed or volunteering at \_\_\_\_\_ in any position that requires background screening as a condition of employment, I must immediately notify my supervisor/employer of any arrest and any changes in my criminal record involving any of the above listed provisions of Florida Statutes or similar statutes of another jurisdiction whether a misdemeanor or felony. This notice must be made within one business day of such arrest or charge. Failure to do so could be grounds for termination.

I attest that I have read the above carefully and state that my attestation here is true and correct that **my record does not contain any of the above listed offenses**. I understand, under penalty of perjury, all employees in such positions of trust or responsibility shall attest to meeting the requirements for qualifying for employment and agreeing to inform the employer immediately if arrested for any of the disqualifying offenses. I also understand that it is my responsibility to obtain clarification on anything contained in this affidavit which I do not understand prior to signing. I am aware that any omissions, falsifications, misstatements or misrepresentations may disqualify me from employment consideration and, if I am hired, may be grounds for termination or denial of an exemption at a later date.

SIGNATURE OF AFFIANT: \_\_\_\_\_

**Sign Above OR Below, DO NOT Sign Both Lines**

To the best of my knowledge and belief, **my record contains one or more of the applicable disqualifying acts or offenses listed above. I have placed a check mark by the offense(s) contained in my record.** (If you have previously been granted an exemption for this disqualifying offense, please attach a copy of the letter granting such exemption.) (Please circle the number which corresponds to the offense(s) contained in your record.)

SIGNATURE OF AFFIANT: \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
SIGNATURE OF NOTARY PUBLIC, STATE OF FLORIDA

\_\_\_\_\_  
(Print, Type, or Stamp Commissioned Name of Notary Public)

(Check one)

Affiant personally known to notary

OR

Affiant produced identification

Type of identification produced: \_\_\_\_\_

# **Physical Contact & Social Media Policy**

## **MaliVai Washington Youth Foundation**

This memo is to clarify our policies and procedures regarding bodily contact at the MaliVai Washington Youth Foundation and the consequences that will be incurred if this policy is not followed. This is a SAFETY issue and must be followed exactly.

Any volunteer determined to be in violation of this policy will be subject to disciplinary measures up to and including counseling session, verbal warning, written warning, suspension or termination at the discretion of the management staff and Executive Director.

### **Acceptable Body Contact**

- Handshake
- High five
- Quick hug in greeting/departure
- Arm around shoulder
- Arms on shoulders while making eye contact
- Comforting a hurt or scared child
- Carrying a child who is injured if no further injury will be sustained
- Restraining or removing a child who is in danger of hurting themselves or others or is extremely disruptive (with an ADULT witness, ideally a management staff member)
- Other behavior as deemed acceptable by management staff.

### **Unacceptable Behavior**

- Physical displays of affection (extended hugs, kissing, inappropriate touching, etc)
- Kids jumping on the counselors/volunteers inappropriately
- Pushing, shoving, kicking, hitting, punching, jumping on, tripping, chest thumping, bumping, etc.
- Any of the above even if it is in 'play'
- Any of the following, even if no contact is made: 'boxing/punching' jabs with no contact, 'dunking' on people, getting up in someone's face
- Picking kids up and turning them upside down
- Other behavior as deemed unacceptable by management staff.

## **Social Media Policy**

Public communication, including social networking websites such as Facebook, MySpace, Twitter, YouTube, Yahoo! Groups, etc should not be threatening, obscene, defamatory, infringe on intellectual property rights, invade the privacy of anyone, contain illegal content or be injurious to another person (including employees, students and volunteers of MWYF). Please adhere to the following guidelines:

- a.) A volunteer may not speak on behalf of MWYF on his/her social media posting
- b.) A volunteer may not post proprietary or confidential MWYF content on any social media posting
- c.) A volunteer may not post the names of MWYF employees, volunteers, students, donors or partners on a social media posting. Volunteers should not post pictures of employees, students, other volunteers or company property on the Internet without expressed permission from the Executive Director
- d.) Volunteers are not permitted to use MWYF logos or trademarks on social media postings or reproduce MWYF materials without obtaining written permission from the Executive Director
- e.) Volunteers must keep in mind that if he/she posts content on any social media posting that is in violation of MWYF Policy and/or federal state or local law, a disclaimer will not shield him/her from disciplinary action
- f.) **As a volunteer, I agree to not add or follow any students on any social media outlets or share my personal email or phone number with any students enrolled in the MWYF program.**

This policy applies to all public communications outside of MWYF including blogs, websites, broadcast, emails, instant messaging, text messages, chat rooms, statements to the media, public statements, etc. Violation of this Policy may lead to disciplinary action including being relieved of your volunteer service with MWYF.

**PLEASE SIGN AND DATE THIS MEMO AND RETURN WITH APPLICATION!**

*If you have any questions about the Physical Contact or Social Media Policies please do not hesitate to contact MWYF offices.*

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date



**\*Only complete  
if you are 18  
or older\***



## **BACKGROUND SCREENING**

**PLEASE TAKE THIS DOCUMENT TO A JSO SUB-STATION BEFORE RETURNING TO MWYF.** JSO substations are located on Powers Ave (off University), Regency Mall, Gateway Mall and Superior Street.

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

The person described below holds or is applying for a sensitive position with the MaliVai Washington Youth Foundation. Pursuant to Sections 39.001 and Chapter 435, 984, and 985 Florida Statutes, the MaliVai Washington Youth Foundation requests a local and national law enforcement records check on the applicant listed below:

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_

Aliases or Maiden Name(s): \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Race: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Present Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Previous Address: \_\_\_\_\_ Zip: \_\_\_\_\_  
(if less than 2 years at present address)

Signature of person consenting to records check: \_\_\_\_\_

Please document the findings below and return to the MaliVai Washington Youth Foundation.

Record Found:  Yes  No

\*If record is found, please attach arrest document.

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

Substation: \_\_\_\_\_

Return to: MaliVai Washington Youth Foundation  
1096 W. 6<sup>th</sup> Street Jacksonville, FL 32209  
(904) 359-KIDS (5437) (904) 301-3789 Fax



# Mandatory Training Dates

Earn volunteer hours and help Jacksonville youth succeed!

By signing up as a mentor, you are committing to spend one afternoon per week volunteering at our after-school program, helping our kids with their homework and being a positive role model.

## MENTOR TRAINING SESSIONS

Training sessions are mandatory for all **new and returning** mentors. You may not begin mentoring until you have attended training and turned in all paperwork. Please choose one of the following trainings:

### Fall 2015 Training Dates (All trainings are 4pm-5pm at our Youth Center)

- Returning Adult Mentors:
  - Wednesday, September 2<sup>nd</sup>
- New Adult Mentors, Returning and New High School Mentors- please RSVP for the training session on the day of the week that you plan to mentor:
  - Monday, September 14<sup>th</sup>
  - Tuesday, September 15<sup>th</sup>
  - Wednesday, September 16<sup>th</sup>
  - Thursday, September 17<sup>th</sup>
- Additional Training Dates:
  - Monday, October 5<sup>th</sup>
  - Monday, October 19<sup>th</sup>

### Spring 2016 Training Dates (All trainings are 4pm-5pm at our Youth Center)

- Thursday, January 14<sup>th</sup>
- Monday, January 25<sup>th</sup>
- Tuesday, February 9<sup>th</sup>
- Wednesday, February 17<sup>th</sup>

Please contact Jasmine Lewis to sign-up for a Mentor Training Date!

Email: [Jasmine@malwashington.com](mailto:Jasmine@malwashington.com)

Office Phone: (904) 359-5437 (KIDS)