



# The Salvation Army

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

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

## Volunteer Application

**- NOT working with CHILDREN**

### Volunteer Opportunities

Soup Kitchen

Food Pantry

Adult Programs

Community Service | WEP

Other: \_\_\_\_\_

General Office/Clerical

General Maintenance

Driver: **MVR Form Required. See Officer.**

Emergency Disaster Services (EDS):

To volunteer for EDS, please go to:

[disaster.salvationarmyusa.org/volunteer/new/](https://disaster.salvationarmyusa.org/volunteer/new/)

### Volunteer Information

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

*Last, First MI*

DOB: \_\_\_\_\_

**\*\*Parent/Guardian consent required, if a minor (under 18)**

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

*Street Address, Apartment/Unit #, City, ST Zip*

SS#: \_\_\_\_\_

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

Email: \_\_\_\_\_

**(Required for Territorial Registry Check)**

### Availability / Experience

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

Days/Time Available: Mon Tue Wed Thr Fri Sat

Mornings

Afternoons

Evenings

Physical Limitations, if any: \_\_\_\_\_

Prior Volunteer Experience: \_\_\_\_\_

Have you ever previously volunteered for The Salvation Army? ☐ YES!! ☐ NO

If yes, when? \_\_\_\_\_

### Emergency Contact Information

*In the event of an emergency, please notify:*

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

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

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

Company: \_\_\_\_\_

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

### Reference

**You may contact the following as a reference:**

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

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

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

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

### Consent

**Adults Only:** Signing here authorizes The Salvation Army to recognize

YOU on its website(s) and/or various social media outlets:

=====

**\*\*Parent or Legal Guardian (If volunteer is a minor, under 18):**

Signing here gives your consent to your minor child **volunteering:**

Signing here grants The Salvation Army the absolute, unrestricted and unlimited license, right, permission and consent to use, disseminate, print and publish minor's name and picture on its website(s) and/or various social media outlets:

Parent/Legal Guardian Signature

Parent/Legal Guardian Signature



DOING THE MOST GOOD

The Salvation Army – USA Eastern Territory

## **KeepSAfe: Policies for Child & Vulnerable Adult Protection**

### **KeepSAfe Principles**

#### **1:1 Policy Statement**

The Salvation Army is committed to protecting minors and vulnerable adults in its care, in all of its many programs. Salvation Army personnel are required to take all reasonable steps to avoid the abuse of minors and vulnerable adults and to institute reasonable preventative measures to protect the vulnerable populations in their care. Ministry to vulnerable populations is a sacred responsibility and all Salvation Army personnel share in the responsibility to safeguard people, programs and the mission in a manner that is reasonable under the circumstances that services are being delivered.

This policy is intended to be consistent with and supplement all applicable National Salvation Army policies, including The Salvation Army National Policy Statement on Child Abuse, The Salvation Army National Policy Statement on Non-Discrimination in Programs and Delivery of Services and The Salvation Army Social Services Code of Ethics.

#### **1:2 KeepSAfe Code of Conduct**

All Salvation Army officers, employees and volunteers are expected to adhere to the following KeepSAfe guidelines with regard to child & vulnerable adult protection:

- Salvation Army personnel will diligently work to prevent abuse and neglect among children or vulnerable adults.
- Salvation Army personnel will not physically, verbally, sexually, or emotionally abuse or neglect children or vulnerable adults.
- Salvation Army personnel will immediately report concerns about inappropriate behaviors or policy violations to their supervisor.
- Salvation Army personnel will comply with Mandated Reporter laws and report any suspected abuse or neglect of a child or vulnerable adult to the appropriate government authorities.
- Salvation Army personnel will comply with all KeepSAfe policies and training requirements concerning child and vulnerable adult protection.
- Salvation Army personnel, as reasonably possible, will avoid one-on-one interactions with minors and vulnerable adults in Salvation Army programs where they cannot be seen and/or heard by others.
- Salvation Army personnel will conduct all electronic and other communications with minors and vulnerable adults in an open manner that maximizes their accountability.
- Salvation Army personnel will not retaliate against others who, in good faith, share concerns or policy violations; report observed or disclosed abuse or suspicion of abuse.

#### General Definitions:

**Salvation Army Personnel:** Salvation Army workers, including officers, employees and volunteers (including lay leaders/local officers and soldiers where applicable); cadets in The Salvation Army College for Officer Training.

**Minor:** Youth under the age of 18.

**Vulnerable Adult:** Any person 18 years of age or older who cannot completely care for themselves or are vulnerable to exploitation due to: A physical or mental condition, advanced ages, drug or substance abuse, homelessness or economic challenge, sexual exploitation or other social challenges, any other reason.

**Mandated Reporter:** Anyone with knowledge or a reasonable suspicion of abuse who must report under applicable law. In addition to compliance with applicable mandated reporting laws, internal reports are required. Salvation Army Officers, program directors, licensed professionals and supervisors are generally Mandated Reporters with respect to abuse that occurs in Salvation Army programs.



Sign here if you have read and agree to  
The Salvation Army KeepSAfe Principles.

Date



## Kitchen Volunteer Health Policy Agreement

### **Reporting: Symptoms and Exposure of Illness**

- Vomiting
- Diarrhea
- Sore-throat with fever
- Lesion / Infected Wound (depending on covering)

Or have been exposed to any of the illnesses listed below through:

- An outbreak of reportable illnesses
- A household member having a reportable illness
- A household member attending or working in a setting with an outbreak of any of the illnesses

### **Reporting: Diagnosed Illnesses:**

I agree to report to The Salvation Army officer or volunteer/manager if diagnosed with:

*Campylobacter	*Cryptosporidium	*Cyclospora	*Entamoeba Histolytica	*Giardia
*Hepatitis A Virus	*Norovirus	*Salmonella SPP	*Salmonella Typhi	*Shigella SSP
*Vibrio Cholera	*Yersinia	*Enterohemorrhagic or Shiga toxin-producing Escherichia Coli		

NOTE: If a volunteer has been diagnosed by a doctor with one of the above illnesses, The Salvation Army officer or volunteer/manager must actively restrict/exclude you from volunteering and report to the health department.

### **Returning to Volunteer**

If you are excluded from volunteering for exhibiting symptoms or illnesses above, you will not be able to return to volunteer until the symptoms have ended and/or the Health Department approval is granted.

### **Agreement**

I understand that I must:

- Report when I have or have been exposed to any of the symptoms or illnesses above; and
- Comply with work restrictions (allowed to come to work, but duties may be limited) and/or exclusions (not allowed to come to work) that are given to me.

I understand that if I do not comply with this agreement, it may put the public at risk and can result in me no longer being able to volunteer at The Salvation Army.

Sign below if you will be volunteering in a kitchen.

### **Volunteer Signature**

Date

# The Salvation Army - Northeast Ohio Safety Protocols and Volunteer Worker's Agreement

The following agreement between \_\_\_\_\_ and The Salvation Army of \_\_\_\_\_  
(volunteer Last Name, First Name MI)  
will be in place while volunteering at The Salvation Army.  
(corps name)

Its purpose is to identify the purpose and mandated requirements to meet all safety precautions while volunteering at a Salvation Army facility location.

By signing this agreement, I agree to follow the mandated requirements including, but not limited to, the following:

**Mask** - If a mask mandate is in effect, I will wear a face mask while volunteering. This includes:

- Being transported in a designated Salvation Army vehicle.
- Volunteering at a Salvation Army facility.
- Wearing a mask that The Salvation Army approves, if not provided.

**Hand Sanitizers** – I will use hand sanitizers while I am volunteering for or at a Salvation Army facility.

**Health** – I will not volunteer if ill and will contact The Salvation Army. I understand that if I volunteer when ill, or show signs of illness, I will not be allowed to volunteer for that day. I agree to have my temperature checked and recorded before beginning a volunteer shift, and, at any time during a shift.

**Additional Policies** – I will abide by any additional safety policies explained to me throughout the dates and terms of service as a volunteer.

**Termination** – I understand that termination may take place if I fail to adhere to these safety protocols. By not signing this agreement, I am not eligible to volunteer.

- I will volunteer as outlined without compensation. I acknowledge that I am not an employee of The Salvation Army.
- I understand The Salvation Army is a religious and charitable organization that requires the assistance of volunteers in the conduct of its various spiritual and social service programs.
- I agree to give The Salvation Army at least 24-hours notice or as much lead time as possible if I will not be able to perform my volunteer assignment.
- I will give 2 weeks notice whenever possible for vacation absence, or if my volunteer work will be interrupted for an extended period of time.
- I will facilitate record keeping by signing in and out and wearing appropriate identification when volunteering.
- I will attend any orientation sessions, on-the-job training and continuing education programs as necessary and in the required time-frame.
- I will protect confidential information, including the names and circumstances of all clients served, and exercise good judgment and respect when working with clients and on The Salvation Army's behalf.
- I will not bring any form of weapon or explosives, firearms or any illegal knives.
- I will not bring or consume drugs or alcohol during the time I am on the premises and I will not arrive intoxicated or under the influence of any illegal substance or if impaired by prescribed drugs.

**By signing below, I acknowledge that I have read and agree to  
The Salvation Army - Northeast Ohio  
Safety Protocols and Volunteer Worker's Agreement.**

Volunteer

Date

## Volunteer Approvals

Volunteer Name:

Local Unit Corps Officer / Supervising Officer Approval:

This Applicant will be volunteering from through

Divisional Volunteer Coordinator/HR Director Approval:

Territorial Registry:

National Sex Offender Public Website: