



## Steps to becoming a Volunteer

Dear Prospective Volunteer,

Thank you for your interest in volunteering with The Children's Attention Home. We match volunteers with specific roles based on their skills, experience, availability as well as our current need. Please read the following information carefully to ensure a great start to your volunteer process. We look forward to working with you and getting to know you.

### Volunteer Requirements:

- Students must be at least 18 years of age and are required to be enrolled in an institute for higher learning to work directly with our children. Students are also required to commit to a regular schedule for a full semester (Jan-April/May-Aug/Sept-Dec).
- Volunteers that are 18 years of age and are not enrolled in an institute of higher learning may apply to serve in roles that do not have interaction with our children.
- All other volunteers must be at least of 21 years of age.
- Volunteers may not have any prior charges for felony, child abuse, or crimes against people.
- Volunteers are required to complete an application, interview, and attend our volunteer orientation.

There are three steps on your road to becoming a volunteer.

1. Complete and return your volunteer packet to my attention (Sharada Abraham, Children's Attention Home, PO Box 2912, Rock Hill, SC 29732)
2. Complete phone interview & if accepted schedule your volunteer orientation.
3. Schedule your first day on the "job" with your area supervisor and any needed additional training.

If you have any questions about the forms or requirements, please contact Sharada Abraham at [sabraham@attentionhome.org](mailto:sabraham@attentionhome.org) or 803-372-6840.

Thanks again for your interest!

**Please return completed forms and payment via mail to:**  
**Sharada Abraham, Volunteer Coordinator**  
**The Children's Attention Home, Inc**  
**PO Box 2912     Rock Hill, SC 29732**

# Volunteer Application

Name \_\_\_\_\_

Address \_\_\_\_\_ City: \_\_\_\_\_ State/Zip: \_\_\_\_\_

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

Email Address \_\_\_\_\_

SSN: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_

Emergency Contact/Relationship: \_\_\_\_\_ Phone #: (     ) \_\_\_\_\_

How did you hear about CAH?

\_\_\_\_ Website \_\_\_\_ Facebook \_\_\_\_ Friend \_\_\_\_ Other \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

How long have you been with this employer? \_\_\_\_\_

If less than one year, please list previous employer? \_\_\_\_\_

Level of Education: \_\_\_\_ High School \_\_\_\_ Some College \_\_\_\_ College Degree \_\_\_\_ Graduate Degree

Field of Study: \_\_\_\_\_

Are you bilingual? YES NO If so, please list other languages spoken \_\_\_\_\_

Church/Club/Organization Affiliation: \_\_\_\_\_

Student/School Attending: \_\_\_\_\_ Year/Major: \_\_\_\_\_

Are you volunteering for class requirements? YES NO If so, please list the number of required hours? \_\_\_\_\_

Class: \_\_\_\_\_ Professor: \_\_\_\_\_ Contact #: \_\_\_\_\_

Please list your experience mentoring/volunteering with youth:

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

Please list special skills/abilities that you would like to share with the children in our care/in an office setting.

\_\_\_\_\_

**References: Please list 3 non family members that you have known for at least one year and that you know well enough to vouch for your character, reputation and morals. References can be coworkers, friends, supervisors, bosses, teachers, neighbors, etc. The volunteer office will contact references by email or phone.**

Name	Phone	Email	Relationship
------	-------	-------	--------------

_____	_____	_____	_____
-------	-------	-------	-------

_____	_____	_____	_____
-------	-------	-------	-------

_____	_____	_____	_____
-------	-------	-------	-------

- ☐ I would like to make a **WEEKLY** commitment to the Children's Attention Home and am interested in the following:

**Direct Service Opportunities**

Meal Time Assistant  
Cottage Buddy  
Fitness/Dance Instructor  
Study Buddy  
Life Skills  
Translator

**Indirect Service Opportunities**

Fundraising/Marketing  
Office Assistance  
General Maintenance/Landscaping  
Photography/Videography  
Cleaning/Organizing

\_\_\_\_\_ **First Choice** \_\_\_\_\_ **Second Choice**

Please list specific skills that apply to the opportunity you are interested in:

**Availability (Weekly--Please list specific times)**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

- ☐ I would like to make a **BI-WEEKLY/MONTHLY** commitment to the Children's Attention Home and am interested in the following (please check all the apply):

- ☐ Creative Arts (art, music, drama) specify \_\_\_\_\_  
☐ Blessed Hands Hair Care (license set and previous experience required)  
☐ Other \_\_\_\_\_

- ☐ I am interested in:

- ☐ Sponsoring a Birthday  
☐ Sponsoring a Meal  
☐ Sponsoring an Activity/Outing  
☐ Sponsoring a Collection Drive

I CERTIFY THAT ALL INFORMATION SUBMITTED BY ME ON THIS APPLICATION IS TRUE AND COMPLETE, AND I UNDERSTAND THAT IF ANY FALSE INFORMATION, OMISSIONS, OR MISINTERPRETATIONS ARE DISCOVERED, MY APPLICATION MAY BE REJECTED AND IF I AM OFFERED VOLUNTEER SERVICE SAID SERVICE MAY BE TERMINATED AT ANY TIME. IN CONSIDERATIONS OF MY VOLUNTEER SERVICE, I AGREE TO CONFORM TO THE AGENCY'S RULES AND REGULATIONS, AND I AGREE THAT MY VOLUNTEER SERVICE MAY BE TERMINATED, WITH OR WITHOUT CAUSE, AND WITH OR WITHOUT NOTICE, AT ANY TIME, AT EITHER MY OR THE AGENCY'S OPTION. FURTHER, I HEREBY AGREE TO HOLD HARMLESS THE BOARD OF DIRECTORS, STAFF, VOLUNTEERS, AND RESIDENTS OF THE CHILDREN'S ATTENTION HOME, INC, FROM ANY CIVIL OR CRIMINAL LIABILITIES ARISING FROM MY VOLUNTEER SERVICE.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

## CONFIDENTIALITY STATEMENT

The Children's Attention Home has the responsibility to respect and maintain confidentiality of all the children and families that we serve. Every child and family has the right to [privacy and all staff/volunteers must respect this right. The following are the guidelines in respect to the confidentiality. **All staff and volunteers must follow these guidelines.**

**1. The staff/ volunteer will not disclose any information about any child and/or family present in care or who have been in care, to anyone except appropriate staff members or those directly involved in the case.**

All information pertinent to the client care and service delivery and/or respective family should be shared with the other member of the treatment team. We should all be careful, however, of the purpose and the manner in which the information is shared. Information should be shared, as needed not as idle gossip. The staff needs to be very careful not to discuss children or their situations where other children, unauthorized staff or outside people are present. Information regarding the child and child's family situation must be safeguarded and must not be discussed with other children. Educational information should be shared with the school for educational and case management purposes authorized by release of information form. Other individuals or agencies such as mental health therapist, psychologist, vocational counselors, etc. may have need of certain information as well. Only agencies and individual authorized by placing agency and/or provider via written consent for release of confidential information shall receive disclosure of any information regarding the child.

Federal and state confidentiality statutes shall bind all personnel, both paid and volunteer. All records, information and materials pertaining to a referral, investigation, and plan for remedial action, if any, must be treated in a confidential manner by the involved agency, aiding organization, staff and/or chief executive, licensing authorities, their staff, and all other persons who participated in or have knowledge of the incident and consequent action. (See Section 780, Reference Data-Section 20-7-690, South Carolina Code of Laws).

**2. All information, records and written material pertaining to a child and family must be properly safeguarded and released only to those specified by the release of information form.**

**Children's Attention Home, Inc. staff/volunteers shall maintain strict confidentiality and privacy of all information, records and communications regarding residents.**

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

The Children's Attention Home  
Annual Conflict of Interest Statement

**Policy Statement:** It is the policy of the Children's Attention Home that teammates, Board members and other volunteers avoid any actual or perceived "conflict(s) of interest." Any actual or perceived conflicts must be disclosed immediately and fully. In the case of any identified actual or perceived conflict of interest, the involved individual does not participate in any discussion or vote taken with respect to such interest. All those covered by the policy must sign a "Conflict of Interest Disclosure Statement" annually.

**Definition:** Conflict of Interest – "Conflict of interest" means a conflict, or the appearance of a conflict, between the private interests and official responsibilities of a person in a position of trust.

**Examples of Potential "Conflict(s) of Interest":**

- Holding an ownership interest in a business or profession that provides goods or services to the organization
- Having a financial or other interest in the assets, leases, business transactions, or professional services of the agency
- Accepting favors, gifts, gratuities, or taking part in any activities or transactions that relate to, effect or influence decisions made for, regarding, or on behalf of the organization
- Using donor information or relationships inappropriately or in ways that might damage donor confidentiality and/or relationships with the organization
- Steering or accepting referrals of applicants or persons served to a private practice in which teammates, consultants, or the immediate families of teammates or consultants are engaged
- Low interest or forgiveness of personal loans made by the organization to covered persons
- Preferential treatment of covered persons when applying for and receiving the organization's services
- Nepotism

**Reporting Procedure:**

- Actual, potential and/or perceived conflicts of interest must be reported in writing as soon as they arise to the Executive Director or the Chairperson of the Board of Directors.
- The ED/Chairperson will review, investigate and either resolve the actual, potential or perceived conflict, notifying the reporter in writing, or bring the matter to the Board Executive Committee for resolution.
- If a member of the Board Executive Committee is the subject of any conflict of interest matter brought before the Committee, the involved member will abstain from voting in the conflict matter.
- The final resolution should be submitted in writing and included in any related committee minutes.

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_