



VOLUNTEER APPLICATION FORM

The following information is very helpful to us in selection and assigning volunteer roles, organizing training and collecting data for evaluation. Any information you provide us will be completely confidential. Qualified applicants are considered for positions regardless of race, color, creed, religion, gender, nationality, sexual orientation, disability, or marital status. Thank you for your interest in volunteering with FIRE.

APPLICANT INFORMATION			
Last name	First	M.I.	Preferred name:
Street Address:			
City		Zip:	
Home Phone and/or Mobile Phone:		Email Address:	

Please check all that apply to you:

Gender:	Years of School:	Employment:	Age:
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> High School <input type="checkbox"/> Adult Diploma/GED <input type="checkbox"/> A.A./Certificate <input type="checkbox"/> B.A./B.S. <input type="checkbox"/> Master's Degree <input type="checkbox"/> Other (Specify) _____	<input type="checkbox"/> Employed <input type="checkbox"/> Unemployed <input type="checkbox"/> Homemaker <input type="checkbox"/> Retired <input type="checkbox"/> Student	<input type="checkbox"/> 16-21 <input type="checkbox"/> 22-24 <input type="checkbox"/> 25-34 <input type="checkbox"/> 35-44 <input type="checkbox"/> 45-54 <input type="checkbox"/> 55 – 60+ Date of Birth: <i>(optional)</i>

Employer/School name:	
Occupation:	
Work Phone:	In case of cancellation, the best phone to reach you: <input type="checkbox"/> Work Phone <input type="checkbox"/> Home/Mobile Phone
Emergency Contact Name:	Emergency Contact's Phone:
Do you have any medical conditions that would prevent you from performing activities indicated on the volunteer position?	
Physician's name and number (if applicable):	



Foundation for Immigrant Resources and Education (F.I.R.E.)
c/o Central Presbyterian Church
500 Cedar St., St. Paul, MN 55101
www.fireprograms.org; info@fireprograms.org
(PH) 651-224-4728 ext. 111; (FAX) 651-291-1469

VOLUNTEER REFERENCES

APPLICANT INFORMATION
Name

In an attempt to ensure that we provide the best possible service to adult learners, we require that each new volunteer provide references.

Please include two people, at least one of whom knows you in a professional context (including a work or volunteer supervisor, professor, teacher or religious leader).

REFERENCE ONE
Name:
Title:
Email Address:
How long have you known this individual? In what capacity?

REFERENCE TWO
Name:
Title:
Email Address:
How long have you known this individual? In what capacity?

I permit the Foundation for Immigrant Resources and Education to contact these individuals in order to complete confidential references:

Signature	Date
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VOLUNTEER PLACEMENT INFORMATION

How did you hear about FIRE?

Have you completed a MN Literacy Council (MLC) pre-service training? If so, when?

If not would you like more information?

Areas of Interest (Please check all that apply)

Tutoring Capacity

- One-on-one tutoring
- GED Preparation
- ESL Small group tutor
- ESL Classroom Assistant
- Computer Teacher
- Computer Lab Assistant
- Children's Literature

Non-Tutoring capacity

- Administration/Program Support
- Student Intake/Registration
- Other areas (please specify):**

Schedule of availability

*Please indicate the times and days you are available to volunteer. Times indicated are CLASS times only. **We recommend a 30-minute recommended prep time before class.** If you have more than one option, please number the schedules according to your best preference (Example, labeling #1 means this is your preferred time).*

Class Schedules	Monday	Tuesday	Wednesday	Thursday
10:00 – 12: 30 PM	<i>No classes</i>		<i>No classes</i>	<i>No classes</i>
6:00 – 8:15 PM				

Are there specific conditions concerning your availability that we should be aware of (ex. Time restrictions, other times available other than above, etc)?

Please list and briefly describe past or present volunteer experiences:

Describe any cross-cultural experiences you have had, either in the U.S. or in another country:



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Volunteer Conduct Agreement (VCA)

In order to avoid misunderstandings and create a safe, healthy and effective learning environment, this VCA outlines specific behaviors and attitudes outside the scope and objectives of the volunteer program that are inconsistent with the philosophy and mission of FIRE. All volunteers must understand and heed the following prohibitions, or be subject to immediate dismissal.

Examples of prohibited behaviors and attitudes that are grounds for immediate dismissal from FIRE's volunteer program include, but not limited to:

1. The use of sexist, racist, homophobic, or prejudicial language and humor.
2. Any attempt to evangelize, proselytize, convince or convert students to religious or political beliefs other than their own. (FIRE celebrates diversity and respects the rights and liberty of each individual to practice their own religion and political beliefs).
3. The use of FIRE facilities, computers, or student/staff interactions for personal financial gain.
4. The use of FIRE computers to access sexually explicit or pornographic content.
5. The use of suggestive statements and/or the making of advances that could be considered "suspicious" within a volunteer, student, and/or teacher relationship. These include but not limited to: dating learners, sexual invitations, and/or the use of sexually implicit or explicit messages of any kind that cause the recipient to feel uncomfortable and unsafe in the relationship.
6. Failure to follow through within time commitment, including regular absence and/or tardiness from scheduled activities. Three unexcused absences, defined as not calling in advance to explain why the commitment cannot be fulfilled, are grounds for termination.
7. The use of chemical substances or alcohol prior to or during a teaching session.

I understand and will comply with the agreement of conduct. I understand that breaking this agreement could be grounds for dismissal from the volunteer program at FIRE.

Printed Name	Date
Signature	



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Consent and Release Form

I, _____ (PRINT NAME), on behalf of myself, my heirs and assigns, give permission to use my name, voice, picture and comments for editorial, advertising, publicity, web-posting, annual reports and all other communication materials and programs prepared by the Foundation for Immigrant Resources and Education (FIRE) and its affiliated literacy projects, agents and representatives.

The Foundation for Immigrant Resources and Education may modify or edit the above, provided that such editing does not materially change the information or viewpoint that I provided.

Signature	Date
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Optional

<i>Street Address:</i>	
<i>City</i>	<i>Zip:</i>
<i>Home Phone and/or Mobile Phone:</i>	<i>Email Address:</i>

FIRE Witness:



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Signature	Date
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FIRE Witness:
