



The
FOOD BANK
@ST. MARY'S

Volunteer Application

OFFICE USE ONLY

_____ Background check
_____ Orientation

Please return to:

The Food Bank @ St. Mary's
611 20th Avenue South
Seattle, WA 98144
Phone: (206) 338-7215 x23
Email: admin@thefbsm.org

Name: _____ Pronouns: _____ Date: _____

Address:		Phone:	
		Email:	
Employer/School:			
Does your employer offer matching gifts for volunteer work? _____ YES _____ NO _____ I don't know, but I'll check!			
Valid Driver's License? _____ YES _____ NO		If yes: License # _____	
Any Health Limitations?		Date of Birth _____	

Availability: Please list times you prefer to work. Remember that you may change these hours at any time.

Mon	Tues	Wed	Thurs	Fri

Total hours desired per week: _____

In what capacity would you most like to volunteer? Please circle your preference.

Walk-In Food Bank	The Food Bank @ St. Mary's is open to the public on Mondays, Wednesdays, and Fridays. We serve anyone in the city of Seattle who is in need of food. Volunteers are responsible for sorting, organizing, distributing food to clients, and various cleaning tasks. Shifts are available between 8am-1pm.
Warehouse	Warehouse volunteers help us sort and organize donations or complete other projects on Tuesdays and Thursdays. Shifts are available between 8am-1pm.
Home Delivery	Our Home Delivery Program operates on Thursdays between 9:30am-1pm and serves homebound clients. Volunteers are responsible for delivering food to client homes using their own cars. All drivers must provide proof of insurance.
Donation Pick Ups	We pick up food donations from various donors Monday through Sunday in the mornings. Must have a personal vehicle along with a driver's license and a proof of insurance.

Please check skills that apply to you:

- | | |
|--|---|
| <input type="checkbox"/> Can lift 30 pounds without assistance | <input type="checkbox"/> Carpentry |
| <input type="checkbox"/> Hospitality (good with people) | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Computer skills (typing, data entry) | <input type="checkbox"/> Event Planning |
| <input type="checkbox"/> Writing | <input type="checkbox"/> Languages (please list) _____ |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Other skills (please list) _____ |
| <input type="checkbox"/> Photography | _____ |

Please list two references (not related to you) that you've known for at least one year:

Name:	Phone or email:	Relationship:
Name:	Phone or email:	Relationship:

How did you hear about The Food Bank @St. Mary's? _____

Why do you want to volunteer? _____

Can you make a six month commitment? _____

Is this part of court-appointed community service? _____ YES _____ NO

If Yes: Number of hours: _____ Deadline for completing hours: _____

Have you been convicted of a felony? _____ (Answering yes does not necessarily disqualify you from volunteering.)

If Yes, explain: _____

I certify that the facts contained in this application are true and complete to the best of my knowledge. I authorize investigation of all statements contained herein. I agree and understand that I am responsible for my own medical coverage and I hold The Food Bank @ St. Mary's harmless of medical liability. If I am 18 years of age or younger, I understand that I must have a parent's or guardian's permission to volunteer here.

Applicant Signature Date

Parent or guardian signature (if applicant is under 18) Date

The FOOD BANK @ St. Mary's Volunteer Food Bag Policy

Volunteers who regularly work at The Food Bank @ St. Mary's at least 2 hours per week may take groceries once per week, like any client, but do not have to stand in line. Because we serve over 1,200 households each week and our food supplies are limited, we ask that you take food only if you need it and to abide by the following rules:

1. All guidelines established for clients pertain to volunteers. If you are in need of food, you may go through the line **once** per week. You are welcome to eat the snacks on the break room table as well as the lunch that is prepared for volunteers each day.
2. Please collect groceries **only** on Monday, Wednesday, or Friday, after we close down the line; it is prohibited to shop while we are open for customers, or at any other time except those stated here. If you see somebody putting food aside while working, please remind them of our policy; if you are not comfortable confronting him/her, let a staff member know and we will speak with him/her.
3. If you volunteer on a day that we are not open to the public, you may come on any open day at 10 AM, show your ID at the computer, and go through the line without waiting.
4. If you want US Government Surplus Commodities, please check with a staff member for eligibility (east half of 98144 zip code) and, if eligible, you must fill out and sign the commodity contract (TEFAP).

If you are in need of additional short-term assistance, please speak with any member of the staff. Although our supplies are limited, we try to be flexible in meeting individual needs.

GROCERIES ARE NOT TO BE USED AS A MEANS OF COMPENSATION FOR VOLUNTEER WORK PERFORMED AT FOOD BANK @ ST. MARY'S.

Volunteer Grievance Procedure

Any organization with a staff of more than one person is liable at times to handle a grievance. It is very important that each and every person working at the Food Bank @ St. Mary's understands the client grievance procedure as well as the volunteer grievance procedure. In order to prevent any unfair treatment, the following guidelines have been established:

1. Client grievance procedures are posted outside the building. Extra copies are available at the intake computer desk.
2. Volunteers are encouraged to use the open door policy seeking solutions to problems. We encourage suggestions and discretion when discussing problems.
3. Notify the Director, Bruce Wood, or the Operations Manager, Deep Singh, of the nature of the complaint.

Volunteer Orientation Checklist

Rules & Expectations.

Be on time. Contact us if you cannot come in for shift	Keep a drug-free environment
No Cell phone or ear gadget use while working.	Maintain a safe and healthy environment
Sign in and out	Maintain cleanliness (wash hands, wear gloves)
Report all accidents	Know your limits (lift only what you can)
Be courteous to clients	Use of photographs taken of me
Follow our "No Smoking" policy	Let staff know of health concerns
Wear closed toe shoes and dress for the weather	Do not enter walk-in coolers unless approved

Sign: _____

Food Bank @ St. Mary's Food Bag Policy

I understand and agree with the following policies, which have all been explained to me:

1. GROCERIES ARE NOT COMPENSATION FOR VOLUNTEER WORK.
2. All guidelines established for clients pertain to volunteers.
3. You may go through the line either 1) after we close to public, or 2) at 10AM on a Monday, Wednesday, or Friday that you do not volunteer.
4. Commodities are for the eastern half of the 98144 zip code.

Grievance Procedure

1. Client grievances posted on outside door.
2. Volunteers use open door policy.
3. Notify a staff member.
4. If unsatisfactory, notify operations manager.

Above all, we want a fair, cheerful, pleasant working environment for all volunteers. These guidelines allow many steps for your voice to be heard, but the most important thing to remember is to voice your concerns—maybe you have a great suggestion that will make things better for everyone. Please feel free to speak to a staff member.

I understand all the above information. I agree to adhere to the rules and expectations set forth by the Food Bank @ St Mary's. In addition, I promise to be fair, ethical, and honest in the performances of my duties. I understand that failure to comply with these policies could result in my loss of volunteer privileges.

Volunteer Signature _____ Date _____

VOLUNTEER MEDICAL INFORMATION

It is expressly understood that the volunteer will not receive any financial compensation, including vacation, sick, personal, or holiday compensation; nor will there be any pension, medical or other insurance coverage provided. The undersigned acknowledges that they could be injured in the course of volunteering but agrees to seek compensation therefore from their own personal insurance and agrees to pay their own medical bills. The undersigned agrees to make no claim for any injury, harm or consequential damages for work-related injury and releases the Food Bank and the Archdiocese from all claims, demands, or causes of action arising there from. I understand that if I am injured in the course of volunteering, I am not covered by the Archdiocese of Seattle workers' compensation program.

Name: _____

Address: _____

City: _____ Zip code _____

Phone: _____

In case of emergency, please call:

Contact _____ Relationship _____

Phone (home) _____ (work) _____

2nd Contact _____ Relationship _____

Phone (home) _____ (work) _____

Name of Insurance Coverage _____

Name of primary care physician _____

Physician phone: _____

I agree and understand that I am responsible for my own medical coverage and I HOLD THE FOOD BANK @ ST. MARY'S HARMLESS OF MEDICAL LIABILITY. All volunteers 18 years of age and younger must have a parent or guardian signature on this form. In the event of an emergency, we will contact your primary caregiver first, then contact the parent.

Volunteer signature _____ Date _____

Parent Signature (if under 18) _____ Date _____

Parent phone (home) _____ (work) _____



The Food Bank @ St. Mary's Confidentiality Agreement

The
FOOD BANK
@ST. MARY'S

Pledge of Confidentiality

All client information, activities, conversations, and records must be kept strictly confidential. This includes, but is not limited to, phone numbers, addresses, health conditions, and other personal information. Any information concerning prospective, current, or past clients may not be released. This policy applies to all volunteers and Board of Director members of The Food Bank @ St. Mary's.

Client confidentiality applies at all times. A client's right to confidentiality does not end when a client ceases receiving services. Therefore, the disclosure of any information regarding a former client is prohibited. Only the client may authorize release of information.

I agree that I will not reveal the identity, history, services received, or location of any client unless authorized by a director. I will not participate in any discussion pertaining to clients of The Food Bank @ St. Mary's while off duty, and will discourage such discussion. When at The Food Bank @ St. Mary's I will share information about clients only when vital to staff inquiries. I will respect the privacy of all volunteers of The Food Bank @ St. Mary's by not disclosing their personal information to anyone without prior consent.

I understand that breach of this agreement may result in my immediate dismissal.

Printed Name: _____

Signature: _____ **Date:** _____

VOLUNTEER BACKGROUND CHECK REQUEST

Disclosure & Notice Statement Pursuant to the Fair Credit Reporting Act

In connection with your employment or volunteer application and for other employment or volunteer purposes, the Archdiocese of Seattle (the "Archdiocese") may seek background information about you from a consumer reporting agency. This information will be in the form of consumer reports.

These reports may be obtained at any time after the Archdiocese receives authorization from you, including any time during the period of your employment if the Archdiocese hires you, or during any period in which you are a volunteer.

Consumer reports include any written, oral or other communication of information by a consumer reporting agency bearing on your character, general reputation and other characteristics that is expected to be used for employment purposes or for determining whether you may become a volunteer. Consumer reports may include criminal records and driving records, among other resources.

Trak-1, our background check vendor, or another consumer reporting agency, will obtain the reports for the Archdiocese. Since these reports are being obtained from a third-party consumer reporting agency, the Archdiocese is complying with the requirements of the Fair Credit Reporting Act.

Signature Date

Printed Name

