



## VOLUNTEER/INTERN APPLICATION FORM

Thank you for your interest in the Alameda County Family Justice Center (ACFJC). We value our volunteers and interns and appreciate the time you commit to us. Please complete this volunteer/intern application and submit to:  
Volunteer Coordinator, ACFJC, 470 27<sup>th</sup> Street, Oakland, CA 94612. (Please use Black/Blue Ink)

### THE FOLLOWING INFORMATION IS CONFIDENTIAL

<b>NAME:</b>		
First	Middle	Last

<b>VOLUNTEER/INTERN POSITION APPLYING FOR:</b> (Please check <u>no more than two</u> )
<input type="checkbox"/> Client Navigator Internship Program (requires a <u>minimum</u> commitment of 200 hours) <input type="checkbox"/> ASW Counseling Intern Program (supervision onsite) <input type="checkbox"/> KidZone Children & Youth Program (internships available) <input type="checkbox"/> Computer Training <input type="checkbox"/> STEP-UP (empowerment program) <input type="checkbox"/> Camp HOPE (summer camping program) <input type="checkbox"/> Special Events <input type="checkbox"/> Administrative/Office Support <input type="checkbox"/> Other: _____
<b>Is this a College Internship?</b> Y / N (Name of School) _____

<b>MAILING ADDRESS:</b>			
Street		Apt/Unit #	
City	State	Zip Code	
Home Number: ( ) _____		Cell Number: ( ) _____	
E-mail address: _____			
What is the best way to contact you (Please Circle)?	Home	Cell	E-mail
What is the best time of day to contact you (Please Circle)?	Morning	Afternoon	Evening

<b>ARE YOU OVER 18?</b> (Please Circle)	YES	NO
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<b>LANGUAGE PROFICIENCY:</b> List language skills, other than English, you have and your levels of proficiency to speak, read, write, etc.	
Language:	Level of Proficiency:

<b>LEVEL OF EDUCATION:</b> Please list your highest level of education and any degrees, certifications, or licenses held.
<b>BACKGROUND CHECK:</b> A background check is required to volunteer/intern at the ACFJC. Driver's State DOB: ____/____/____ License: ____/____ SSN: ____ - ____ - ____

<b>REFERENCES</b>		
List three persons who are not related to you and who have definite knowledge of your business or professional qualifications for the volunteer position for which you are applying.		
<b>Reference One: Name</b>	<b>Business/Occupation</b>	<b>Relationship</b>
<b>Address</b>	<b>City, State, Zip Code</b>	<b>Phone</b>
<b>Reference Two: Name</b>	<b>Business/Occupation</b>	<b>Relationship</b>
<b>Address</b>	<b>City, State, Zip Code</b>	<b>Phone</b>
<b>Reference Three: Name</b>	<b>Business/Occupation</b>	<b>Relationship</b>
<b>Address</b>	<b>City, State, Zip Code</b>	<b>Phone</b>

**Pre-Interview Information**

- How many hours are you able to volunteer per week?  
 Please Circle: 5    10    10+    Other (Please List) \_\_\_\_\_
- Have you used illegal drugs in the last three (3) years?                    Y    N
- Have you been arrested for any crime in the last 10 years?                    Y    N
- Have you been involved in any illegal activity that would disqualify you as a volunteer?    Y    N

If you answered (Y) yes to any of #2 - #4 above please explain: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**CERTIFICATION:** I certify that all statements, information and documents provided with this application are true, complete and correct to the best of my knowledge and are made in good faith. I understand that omissions, misleading, false or untrue information, or any attempt at fraud or deceit in any manner connected with this application and subsequent testing may result in my NOT being considered for a volunteer position with the Alameda County Family Justice Center.

**RELEASE OF INFORMATION:** I authorize the Alameda County District Attorney's Office to conduct a background check and gather all information concerning my character as a condition to applying for a volunteer and/or intern position with the Alameda County District Attorney's Office.

Printed Name

Signature

Date

**Please include a copy of your current resume**

<b>FOR ACFJC USE ONLY</b>	
<b>First Choice:</b>	<b>Second Choice:</b>
<b>Day(s) able to volunteer:</b>	Mon    Tue    Wed    Thurs    Fri
<b>Shift(s) able to volunteer:</b>	
<b>Application Received:</b>	<b>Application Processed:</b>
<b>Application Reviewed:</b> <input type="checkbox"/> Accepted <input type="checkbox"/> Rejected <input type="checkbox"/> Conditional Accept	
<b>Comments:</b>	
<input type="checkbox"/> Interviewed <input type="checkbox"/> Background checked <input type="checkbox"/> Fingerprinting (if needed) <input type="checkbox"/> Assigned to Position	
<b>Orientation:</b>	
Date completed: _____	
<b>Start Date:</b>	<b>End Date:</b>