



## Welcome to Kate's Club!

Thank you for your interest in Kate's Club! We are excited to have you become a part of the Kate's Club volunteer family!

After your entire volunteer packet is received and reviewed, we will contact you to discuss volunteer opportunities and schedule you for our next available volunteer training. Please note that partial application packets will not be reviewed until all required contents are submitted. Completed applications take typically up to one month to process.

### Volunteer Application Checklist

The following items must be included to complete your volunteer packet:

- Completed and signed application
- Copy of your driver license or photo ID
- Two letters of reference (one a non-family member)
- Signed authorization for consent to personal records

Kate's Club is responsible for maintaining the confidentiality of your file and for processing all background check information.

If you have any questions regarding our volunteer policy or the application and orientation process, please feel free to contact Kate's Club at [evyn@katesclub.org](mailto:evyn@katesclub.org) or by phone at 404-347-7619.

Please remit complete application packet to:

Kate's Club

PO Box 11805 Atlanta, GA 30324

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## Volunteer Form

### Personal Information

First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Apt. \_\_\_\_\_ City: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Main Phone: (\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_) \_\_\_\_\_  
Email (1<sup>st</sup>): \_\_\_\_\_ Email (2<sup>nd</sup>): \_\_\_\_\_  
Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Female \_\_\_\_\_ Male \_\_\_\_\_  
Marital Status (circle one): Single Married Separated Widowed Divorced  
Ethnicity (circle one): White Black Hispanic Asian/Pacific Islander Other(\_\_\_\_\_)

### Employer Information

Company: \_\_\_\_\_  
Title/Occupation: \_\_\_\_\_  
Work Phone (\_\_\_\_) \_\_\_\_\_ Ext \_\_\_\_\_  
Fax (\_\_\_\_) \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Email: \_\_\_\_\_

### Emergency Contact

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_  
Address: \_\_\_\_\_  
Main Phone: (\_\_\_\_) \_\_\_\_\_ Alternate Phone: (\_\_\_\_) \_\_\_\_\_

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**Education/Training**

**School/City**

**Major**

**Years/Degree**

High School/GED:

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College/Other:

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Work Experience:

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**Volunteer Experience**

Organization

Duties

Year

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**Background Information**

In the past 5 years, have you ever been convicted of any crime other than a **minor** traffic violation?

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If yes, please explain:

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**Personal References – Two completed reference forms are required.**

Please list the individuals who will be submitting a personal reference form on your behalf. Please note that that at least one reference must be a non-relative.

**1. Name** \_\_\_\_\_ Occupation \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

**2. Name** \_\_\_\_\_ Occupation \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City/State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

**Kate's Club Volunteer Information**

**(please attach an additional piece of paper to respond as needed)**

How did you hear about Kate's Club? \_\_\_\_\_  
\_\_\_\_\_

Do you have any talents, interests, training, and/or skills that you are willing to offer?

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

Tell us about your previous experience working with children: \_\_\_\_\_

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

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Tell us why you want to volunteer for Kate's Club: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Tell us about your hobbies and special interests: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have a personal loss that you feel comfortable telling us about? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_

- Area of Interest (please mark all applicable areas)
- Buddy Interest (*Orientation and Additional Trainings required*)  
*\*Includes summer camp volunteers*
  - Clubhouse Assistance (*clerical and administrative assistance*)
  - Marketing & Outreach Committee
  - Fundraising Committee
  - Kate's Club Cabaret Committee (signature fundraising event)
  - Other (please describe)

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PO Box 11805 Atlanta, GA 30324  
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Additional Comments \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



I hereby certify that all of the answers given by me on this application are true to the best of my knowledge. I authorize Kate's Club to write or telephone my references, whom I have listed on this application for the purpose of acquiring reference information from them, and I release Kate's Club and anyone releasing this information to Kate's Club for any liability based on such release. I understand that volunteer positions are assigned as determined appropriate by Kate's Club based on the availability of an appropriate assignment. I understand that Kate's Club reserves the right to deny approval of my application at their discretion.

As a volunteer applicant of Kate's Club, I agree to:

- Hold as absolutely confidential all information which I may obtain directly or indirectly concerning clients, staff, volunteers or donors.
- Donate my services without expectation of compensation or future employment, for humanitarian and charitable reasons.
- A background check and providing two references.
- Hold Kate's Club, its board, staff, clients, affiliates or volunteers harmless from any liability for expenses for medical treatment or compensation for any injury I may incur arising out of and in the course of my participation in the volunteer activities of Kate's Club. I understand that volunteers do not receive workers' compensation insurance, health benefits, or accident insurance.
- Waive for myself, my heirs, personal representatives, administrators and assigns any and all claims for damages which I may have or that may hereafter accrue to me by reason of my participation in the volunteer programs of Kate's Club.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_

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Kate's Club

PO Box 11805 Atlanta, GA 30324

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## Personal Reference Form

The following is the letter and reference form for you to provide to your personal reference. Please print and copy the letter and form to give to your reference. Have them submit the form directly to Kate's Club on your behalf. Please remember that your application packet is not considered complete until the entire application and reference forms are received.

*Submit completed reference forms to:*

**Kate's Club  
Attn: Volunteers  
PO Box 11805  
Atlanta, GA, 30324**

Please remit complete application packet to:

Kate's Club

PO Box 11805 Atlanta, GA 30324

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Dear Reference,

Kate's Club is a non-profit 501c3 organization based in Atlanta committed to empowering children and teens facing life after the death of a parent or sibling.

Kate's Club creates a network of support focused on enabling kids to reach their full potential through involvement in the Atlanta community.

Our families have suffered a loss in their lives; therefore, it is extremely important that we carefully screen all of our potential volunteers. Volunteers can potentially have a powerful effect on a child's life. Please be aware of the crucial role your recommendation plays in our efforts to appropriately screen all potential volunteers.

Please provide as accurate a description of the applicant as possible. It is our goal to place our volunteers in roles that are mutually beneficial to both the families and volunteers. Please complete the attached reference form and submit it to:

Kate's Club  
Attn: Volunteers  
PO Box 11805  
Atlanta, GA 30355

If you have any questions or concerns, please feel free to contact me at any time. Thank you for your time and assistance.

Sincerely,  
Kate's Club

Please remit complete reference form to:

Kate's Club  
Attn: Volunteers  
PO Box 11805 Atlanta, GA 30355

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**Reference Check**

**Name of Prospective Volunteer:** \_\_\_\_\_

**Name of Reference:** \_\_\_\_\_

**Address of Reference:** \_\_\_\_\_

**Phone Number of Reference:** \_\_\_\_\_

**Place of Employment of Reference (if applicable):** \_\_\_\_\_

**Job Title of Reference:** \_\_\_\_\_

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1. **In what capacity and for how long have you known this individual?** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. **How reliable is this individual?** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. **Describe the character of this individual.** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. **Have you observed this individual with children/adolescents? How would you describe the interactions?** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. **What do you consider this individual's major strengths?** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. **Do you know of any characteristics of this person which could adversely effect his/her ability to act as a positive role model for a child?.** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please remit complete reference form to:

Kate's Club

Attn: Volunteers

PO Box 11805 Atlanta, GA 30355

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7. How would you rate this individual's ability to follow through on a commitment? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

8. Would you have any concerns with this individual spending unmonitored time with a child or adolescent? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9. Any additional information that you would like to give us regarding this individual would be greatly appreciated. Please feel free to attach additional paper as necessary. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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*I certify that the information on this reference check is correct to the best of my knowledge. I have read the attached cover letter and realize that this information is being obtained to assess the application of a Kate's Club volunteer.*

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

***This reference is NOT to be returned to the applicant. Please return the completed reference check to:  
Kate's Club  
Attn: Volunteers  
PO Box 11805  
Atlanta, GA 30355***

Please remit complete reference form to:

Kate's Club

Attn: Volunteers

PO Box 11805 Atlanta, GA 30355

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