



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 (professional and/or personal but no family members)**
- 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 volunteer@katesclub.org or by phone at 404-347-7619.

Please remit complete application packet to:
Kate's Club
1190 West Druid Hills Drive NE, Suite T80
Atlanta, GA 30329
404-347-7621 (fax)

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Volunteer Form

Personal Information

First Name: _____ M.I.: _____ Last Name: _____
Address: _____
Apt. _____ City: _____ Zip Code: _____
Main Phone: (____) _____ Alternate Phone: (____) _____
Email (1st): _____ Email (2nd): _____
Birth date: _____ 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 _____

Emergency Contact

Name: _____ Relationship: _____
Main Phone: (____) _____

Volunteer Experience

Organization	Duties	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____

Background Information

In the past 7 years, have you ever been convicted of any crime other than a **minor** traffic violation?
_____ If yes, please explain:

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Kate's Club Volunteer Information

How did you hear about Kate's Club?

- Volunteer Match/ Hands On Atlanta
- Web search
- Word of Mouth
- Friend of Existing Volunteer
- Other _____

What interests you about Kate's Club?

Do you have skills/interests in any of these areas? *(Please check all that apply)*

- | | | |
|--|---|---|
| <input type="checkbox"/> Business Assistance | <input type="checkbox"/> Bulk Mailing | <input type="checkbox"/> Photography |
| <input type="checkbox"/> Filing | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Video Production |
| <input type="checkbox"/> Excel | <input type="checkbox"/> Microsoft Office | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Clerical | <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Writing/Editing |
| <input type="checkbox"/> Data Entry | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Event Coordination |

What previous experience do you have working with children? *(Please check all that apply)*

- | | | |
|---|---|--|
| <input type="checkbox"/> Teaching | <input type="checkbox"/> Volunteering with Children | <input type="checkbox"/> Coaching |
| <input type="checkbox"/> Camp Counselor | <input type="checkbox"/> Babysitting | <input type="checkbox"/> Exercise/Fitness Leader |
| <input type="checkbox"/> Tutoring | <input type="checkbox"/> Troop/ Youth Club Leader | |

Do you have any of the following hobbies/special interest/skills? *(Please check all that apply)*

- | | | |
|-----------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Swimming | <input type="checkbox"/> Reading | <input type="checkbox"/> First Aid/ CPR |
| <input type="checkbox"/> Music | <input type="checkbox"/> Poetry | <input type="checkbox"/> Counseling/Therapy |
| <input type="checkbox"/> Pottery | <input type="checkbox"/> Cheerleading | <input type="checkbox"/> Bereavement Work |
| <input type="checkbox"/> Dance | <input type="checkbox"/> Arts/Crafts | <input type="checkbox"/> Activity Facilitation |
| <input type="checkbox"/> Theatre | <input type="checkbox"/> Sports | |
| <input type="checkbox"/> Yoga | | |

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Do you have a personal loss that you feel comfortable telling us about? *(Please check all that apply)*

- | | |
|----------------------------------|---|
| <input type="checkbox"/> Mother | <input type="checkbox"/> Spouse |
| <input type="checkbox"/> Father | <input type="checkbox"/> Child |
| <input type="checkbox"/> Sibling | <input type="checkbox"/> Other significant loss |

Do you have any past volunteer/ leadership experience?

- Serving on a board
- Serving on a committee
- Leading a project
- Other: _____

Area of Interest (please mark all applicable areas)

- Buddy Interest *(Orientation and Additional Trainings required)*
- Clubhouse Assistance *(clerical and administrative assistance)*
- Marketing & Outreach Committee
- Fundraising Committee
- Fundraising Events
- Intern (School _____)
- Other (please describe)

Additional Comments _____

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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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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
1190 West Druid Hills Drive NE, Suite T80
Atlanta, GA 30329
404-347-7621 (fax)**

Please remit complete application packet to:
**Kate's Club
1190 West Druid Hills Drive NE, Suite T80
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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
1190 West Druid Hills Drive NE, Suite T80
Atlanta, GA 30329
404-347-7621 (fax)

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

Sincerely,
Kate's Club

Please remit complete application packet to:
Kate's Club
1330 West Peachtree Street, NW Suite 520
Atlanta, GA 30319
(404) 347-7621 (fax)
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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: _____

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 affect his/her ability to act as a positive role model for a child?**

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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. _____

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:

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