## Faith-Full Mobile Food Pantry Adult Volunteer Application &

We need help breaking down pallets of food at CCDBR (1900 S. Acadian Thruway, Baton Rouge, LA). Please note that students are invited to volunteer, but must be at least 12 years old.

* Re	equired	
1.	Name *	
2. /	Age *	
3.	Date *	
		<b></b>
4.	Mailing Address	

5.	Mobile phone
6.	Work phone
7.	Home phone
8.	Email Address *
9.	Employer
10.	Your Church
11.	Emergency Contact *

12.	Emergency Contact Phone Number *				
13.	Which type of volunteer work would you prefer to do? (please check all that apply) *				
	work at community distribution site				
	collect/sort donated goods				
	prepare meals				
	office help				
	Other				
14.	Can you lift at least 30 lbs? *				
	○ Yes				
	○ No				
15	Can you withstand working outdoors? *				
13.	Yes				
	○ No				
16.	Special training, skills, hobbies, etc. you have that might be helpful *				

## **Transporting Clients**

We must conduct driving checks on all volunteers driving CCDBR vehicles or transporting clients. If you use your own vehicle, you must provide us with current proof of valid insurance and vehicle registration.

17.	Do y	ou have a valid driver's license? *
	O ,	Yes
		No
18.	Do yo	ou have car insurance? *
	O ,	Yes
		No

## **Background Check**

Conviction of a crime is not an automatic disqualification for volunteer work We may conduct a criminal background check if you are working in special situations.

19.	Have you ever been convicted of a crime? *
	Yes
	○ No
20.	If yes, please explain the nature of the crime, the date of the conviction and disposition.
21.	Are you currently under court supervision? *
	○ Yes
	○ No
22.	If yes, please explain

## Please read the following carefully:

23 Lagree to the above policies \*

I understand this is an application for volunteering and not a commitment from CCDBR and certify the information provided is true, correct and complete. I understand misrepresentations or omissions by me may be cause for my immediate rejection or termination as a volunteer. I acknowledge I have read and understand the CCDBR code of Profession Conduct for Volunteers and authorize a criminal background check. I understand that any action inconsistent with this Code, failure to take action mandated by this Code on my part, or an omission or error in this application may result in disciplinary action, including but not limited to termination of my volunteer services. Waiver: I agree to assume the risk of any accident or injury to person or property that may be sustained in connection with my participation with CCDBR. In addition, I agree to release and discharge CCDBR and any of its directors, officers, employees, volunteers, partners, affiliates and successors from all liability or responsibility for any such accident or injury. I will disclose any physical or psychological ailment that might impede my work. If I enter a course of treatment that might adversely affect my performance of volunteer duties, I will disclose such to my supervisor. Permission for Public Release: I hereby authorize Catholic Charities and the Diocese of Baton Rouge to use or broadcast photos, film and audio recordings of me and to publish any copy I have written. I further authorize Catholic Charities and the Diocese of Baton Rouge to release or circulate the same in any manner for all purposes in any form without my name. I understand the copy, photos and/or videos will be viewed by the public and that other use may be made of them. Volunteer Confidentiality Statement: All volunteers have a responsibility to CCDBR, their clients and donors to maintain the confidentiality of their circumstances and personal matters. I agree to the following: No identifying information about CCDBR clients or donors (names, addresses, social security numbers, physical disabilities, etc.) will be revealed to anyone outside CCDBR and only to those CCDBR personnel to whom the information is necessary for service to the client or donor. Discussing personal circumstances concerning a client or donor, even if names, addresses or social security numbers are not revealed, is also considered a breach of confidentiality. A volunteer must not describe in detail personal circumstances or information concerning any client or donor for whom services were provided, even if a name or address is not revealed. Discussion of or description of any client or donor's personal information or circumstances is considered detrimental to the client and donor's rights to privacy. The fact that a client's name or donor's name has been made public through the media does not alter the fact that the individual still has confidentiality privileges within CCDBR and its programs and agencies. Confidentiality must at all times be maintained

_0.	Tragiles to the above policies.	
24.	Date *	
		:::
25.	FOR THOSE UNDER THE AGE OF 18, Parent's or guardian's permission is required. References must be adults who have known the applicant at least one year. I, as the parent/guardian of give permission for him/her to volunteer with Catholic Charities, Diocese of Baton Rouge, and agree to the policies stated contained herein. Please include the child's name below.	•

26. Signature of Pa	rent/Guardian		
7. Date			
			<b>::</b>

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