



## Volunteer Application

### ACCESS

Ashland Church Community Emergency Shelter Services

1605 CR 1095 Ashland Ohio 44805 419-210-1158

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City/Zip: \_\_\_\_\_

Home or Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

Birthday (MM/DD) \_\_\_\_\_

Do you wish to receive our digital newsletter? \_\_\_\_\_ Email: \_\_\_\_\_

Please specify the day and time in which you would like to volunteer below:

Monday \_\_\_\_\_

Tuesday \_\_\_\_\_

Wednesday \_\_\_\_\_

Thursday \_\_\_\_\_

Weekend Availability \_\_\_\_\_

If you would like to be an on-call volunteer for special events, fundraisers or outreach events

only, please specify your availability: \_\_\_\_\_

Volunteer options with ACCESS, Please check all that apply

In-office work

Outreach events

Community networking

Mentoring

At-home volunteering

Gathering/ Delivering of Donations

Fundraisers

Organization of Donations



**Volunteer Application**  
**ACCESS**  
 Ashland Church Community Emergency Shelter Services  
 1605 CR 1095 Ashland Ohio 44805 419-210-1158

ACCESS Mission Statement:

ACCESS is a program designed to empower Ashland County women and families who have lost stable housing. Our goal is that our guests gain skills to become independent citizens and contribute to our society and economy. The program is more than just temporary shelter; it is designed to be a hand up not a hand out.

ACCESS Confidentiality Agreement- Signed and attached to application.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Staff Section:

\_\_\_\_ Have volunteer sign a full-page confidentiality form and place it in the appropriate folder

\_\_\_\_ Schedule Volunteer

\_\_\_\_ Volunteer job duties: \_\_\_\_\_

\_\_\_\_ Send welcome letter ASAP Date sent \_\_\_\_\_

\_\_\_\_ Add volunteer to Excel database

\_\_\_\_ Removed for inactivity: Date \_\_\_\_\_ Reason \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



***"I was a stranger and you welcomed me."***  
*This project has been supported by the Women's Fund from the Ashland County Foundation*



**A.C.C.E.S.S.**  
**Ashland Church Community Emergency Shelter Services**  
 1605 CR 1095 Ashland Ohio 44805 419-281-3000

*“I was a stranger and you welcomed me.”*

Matthew 25:35 ESV

## Confidentiality Agreement

This agreement restricts employees, board members, coordinators, and volunteers from divulging guests' identities or information obtained while working with ACCESS.

I, \_\_\_\_\_, agree that any and all knowledge or information regarding guests that is obtained during the course of any involvement, volunteering, or employment with ACCESS will remain confidential. I shall not share with anyone outside of ACCESS the names and identities of any and all guests. If at any time I discontinue my relationship with ACCESS, I shall keep confidential indefinitely the names, identities, and information regarding adults and especially all children who are or have been guests of ACCESS.

I also agree that only the ACCESS Board President or Executive Director may discuss or release ACCESS program or financial information to the general public.

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Position within ACCESS

\_\_\_\_\_  
 Address

\_\_\_\_\_  
 Phone

\_\_\_\_\_  
 Email Address

\_\_\_\_\_  
 Church Affiliation

\_\_\_\_\_  
 Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Date

Staff Only-----

\_\_\_\_\_  
 Print Witness name

\_\_\_\_\_  
 Position within ACCESS

\_\_\_\_\_  
 Witness Signature

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
 Date