



Hunt County Children's Advocacy Center

PO Box 8692 Greenville, TX 75404

(903)454-9999 Fax (903)454-9990

Dear Prospective Advocate,

Thank you for your interest in the Hunt County Children's Advocacy Volunteer Advocacy Program. I believe that time is one of the most valuable gifts that we have to give someone else, so I appreciate your interest in helping us provide services to child victims of abuse and adult victims of sexual assault. Enclosed you will find general information about the Advocacy Program, information on our training program, and an application.

Sexual abuse is an issue that people generally try to pretend does not exist, but regardless of whether or not we want to admit the seriousness and prevalence of the problem, women, men, and children are sexually abused and live with the painful scars and memories every day. According to the Rape, Abuse, and Incest National Network (RAINN), "**Every two and a half minutes, somewhere in America, someone is sexually abused.**" Sexual abuse shatters the lives of victims, their families and friends. Whether you are a survivor yourself, you know someone else who has been a victim, or you simply want to help, sexual abuse affects us all.

Volunteers at the Hunt County Children's Advocacy Center have several opportunities to impact our community. Volunteer opportunities at the CAC consist of:

1. **Hotline advocates** provide crisis intervention & support to callers on the 24-hour hotline. For your convenience, the hotline is forwarded to an agency cell phone, or to your own personal phone.
2. **On-call advocates** provide support & crisis intervention to victims and their families at local hospitals.
3. **Office assistants** provide much needed support for our office personnel.
4. **Special events volunteers** assist with special events and fundraisers.
5. **Prevention & outreach volunteers** assist with presentations to the community & networking with agencies in Hunt County.
6. **Pet Therapy Partners** are certified with their animals through the Delta Society to provide emotional support to children in crisis situations.

Please know that you are not only needed, but you can provide crucial, compassionate support and crisis intervention to both child and adult victims of sexual assault; you can truly make a difference in the lives of victims. Due to the nature of our work, there are a few requirements that must be met to volunteer at our agency.

1. **Be at least 21 years of age.**
2. **Fill out a volunteer application, confidentiality statement, and clear a criminal background check.** (Must not have DUI/DWI charges, child abuse or sexual assault charges or allegations, and no charges of crimes against persons.)
3. **Complete a pre-training interview with the Victim Services Coordinator**
4. **Complete a state mandated training course at no charge to you.**
5. **Submit three letters of reference.** (The form you can have filled out by each of your references is included in this packet.)

The staff at the CAC strives to provide quality services to victims of sexual assault and child abuse and to promote safer communities through prevention, education, awareness and community involvement. It is our mission to empower victims to become survivors; all volunteers and staff members who have direct contact with clients are required to complete a state-certified training program that includes presentations on such topics as sexual assault, child sexual abuse, crisis intervention techniques, post-traumatic stress disorder (PTSD), handling suicide calls, crisis call procedures, advocate self-care, grief and healing, domestic violence and domestic violence crisis intervention, role plays, and diversity training. Our training is a time-intensive but rewarding experience that will prepare you to effectively assist and advocate for survivors of sexual assault. The training is scheduled on evenings and weekends to accommodate most work schedules and thoroughly prepares volunteers to handle crisis calls and assist survivors of recent sexual assault at Hunt Regional Medical Center. Moreover, it provides information specific to the diverse and unique population of Hunt County.

Once you have completed the initial training, the time commitment to the Advocacy Program becomes much more manageable, consisting of a one hour-long monthly meeting, and a minimum of two hotline shifts per month, which can be done from home. Required monthly meetings feature debriefing sessions and educational in-services keep advocates up-to-date on new developments and provide ongoing support for this challenging role. Advocates at the Hunt County Children's Advocacy Center staff our 24-hour hotline from their homes, assuming responsibility for a minimum of two shifts per month. In addition, advocates also provide crisis advocacy services at Hunt Regional Medical Center in Greenville with the Sexual Assault Nurse Examiner to assist survivors of recent sexual assault. The role of the advocate is to provide information and resources, normalize callers in crisis, and give unbiased emotional support to survivors of sexual assault and their families.

Volunteering with the Children's Advocacy Program is not only a way to help those in crisis; it is an opportunity to join a helping community of dynamic people. The work is difficult at times, but the rewards are many. Volunteer advocates are the backbone of our agency and provide a round-the-clock safety net for those in crisis. Through training and ongoing education, our volunteers enhance existing skills and learn new ones to offer professional and compassionate crisis intervention services for the Hunt County community.

To begin the application process, please complete the enclosed form; then call me to schedule an interview. Thank you for your interest in volunteering at the Children's Advocacy Center. I look forward to welcoming you into our advocacy group.

Sincerely,

Charlene Ralph
Victim Services Coordinator

Please complete the attached application and return it to the Advocacy Center as soon as possible. The application can be returned before the references are received, however, references may not be completed by family members and if you are employed, one reference must be from your current employer.



Hunt County Children's Advocacy Center Volunteer Application

PO Box 8692 Greenville, TX 75404

(903)454-9999 Fax (903)454-9990

Personal Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
Work Phone	
E-Mail Address	

Hunt County Children's Advocacy Center performs background checks on all employees and volunteers

Date of Birth	
Social Security #	
Driver's License #	State
Has your license ever been revoked or suspended? YES NO	

Education

Highest Level of School Completed	
High School	9 10 11 12 Graduated
College	Some College Associate's Bachelor's Master's Other
Course of Study	
Diploma/Degree	
Licenses/Other Credentials	

Employment

Current Occupation	
Employer	
Address	
Work Phone	
Supervisor	
Work E-Mail Address	

Availability

During which hours are you available for volunteer assignments?

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Interests

Advertising/Promotion Clerical Assistance Fundraising
 Hotline Advocate Prevention and Education Pet Therapy

Please note: **All volunteers** MUST participate in a State certified training course provided by our center.

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

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Previous Volunteer Experience

Summarize your previous volunteer experience.

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Other Information

How did you learn about the Hunt County Children's Advocacy Center?

Have you been convicted of a crime? YES NO If yes, please describe in full. (ex: Misdemeanor, Felony, DWI/DUI)

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Agreement and Signature

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

Volunteer Pre-Interview Questionnaire

Prior to your in-person interview, we would like you to answer the questions below. While they may seem a bit personal, we must evaluate those applying to volunteer at our agency, not only to ensure the safety of our victims, but also to ensure your safety and emotional welfare as well.

1. Are you now receiving or have you ever received counseling?

Yes No

If yes, please explain:

2. Have you ever been hospitalized for emotional problems?

Yes No

If yes, please explain:

3. Do you now or have you ever had a chemical or alcohol dependency/abuse problem?

Yes No

If yes, please explain:

4. Have you ever been charged or convicted of sexual misconduct (including pornography)?

Yes No

If yes, please explain:

5. Have you ever been charged or convicted of domestic violence?

Yes No

If yes, please explain:

6. Have you ever had a DUI/DWI arrest or conviction?

Yes No

If yes, please explain:

7. Have you ever been on probation and/or parole?

Yes No

If yes, please state offense and dates:

(See other side)

8. Have you ever been a victim and/or witness to a sexual assault of any kind?

Yes No

If yes, please explain:

9. If yes to the previous question, did you receive counseling or other therapy to aid in your healing process?

Yes No

10. Do you agree to maintain the minimum liability insurance on your vehicle while volunteering in our program?

Yes No



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CONSENT FOR CRIMINAL BACKGROUND HISTORY CHECK AUTHORIZATION/WAIVER/INDEMNITY

Each staff member or advocate who is to be screened must sign an authorization/waiver/indemnity form, giving approval for the Hunt County Children's Advocacy Center to perform the criminal background search.

I hereby give my permission in exchange for good and valuable consideration for the Hunt County Children's Advocacy Center to obtain information relating to my criminal history record through the state of Texas. The criminal history record, as received from the reporting agencies, may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct committed as a juvenile. I understand that this information will be used, in part, to determine my eligibility for an employment/advocate position with this organization. I also understand that as long as I remain an employee or advocate here, the criminal history check may be repeated at any time. I understand that I will have an opportunity to review the criminal history as received by the Child Advocacy Center and a procedure is available for clarification, if I dispute records as received.

I, the undersigned, do, for myself, my heirs, executors and administrators, hereby, remise, release and forever discharge and agree to indemnify and defend the Center and each of the officers, directors, employees, and agents harmless from and against any and all causes of actions, suits, liabilities, costs, debts and sums of money, claims and demands whatsoever (including claims for the negligence, gross negligence, and/or strict liability of the Center), and any and all related attorney's fees, court costs, and other expenses resulting from the investigation of my background in connection with my application to become a advocate/staff member.

Print Name

Applicant signature

Date



HUNT COUNTY CHILDREN'S ADVOCACY CENTER ADVOCATE REFERENCE

PO Box 8692 GREENVILLE, TN 37404

(903)454-9999 Fax (903)454-9990

_____ has given your name as a reference for working/volunteering at our organization. Our agency serves child victims of abuse and adult victims of sexual assault, so it is important that our advocates are *trustworthy, careful in keeping confidences, good listeners, dependable, and compassionate*. Please fill out this brief questionnaire and mail back to us within *10 days*. If you have questions/concerns, please call.

I hereby waive my rights to access any and all letters or statements of recommendations which may be submitted by the above listed reference in connection with my application for volunteer service to the Hunt County Children's Advocacy Center.

Signature of Applicant

Date

1. How long have you known the applicant? _____

2. How well do you know the applicant? Casual Well Very Well

3. How do you know the applicant? Personal Business Other

If other, please explain:

4. Do you have knowledge of how the applicant relates to people?

Yes No

If yes, please give a short description of your impression:

5. To your knowledge, has the applicant ever had an alcohol or drug problem?

Yes No

If yes, please explain:

(See other side)

6. To your knowledge, has the applicant ever been a suspect in an abuse or sexual violation?

Yes No

If yes, please explain:

7. To your knowledge has the applicant ever been arrested for a misdemeanor or felony crime?

Yes No

If yes, please explain

8. Please circle your answers. Rate the applicant using the following scale:

1= No Opportunity to Evaluate **2**= Poor **3**=Marginal **4**=Acceptable **5**=Good **6**=Superior

Acceptance of people who are different from him/herself	1	2	3	4	5	6
Ability to organize and carry through with tasks	1	2	3	4	5	6
Judgment in making decisions	1	2	3	4	5	6
Ability to accept supervision	1	2	3	4	5	6
Ability to handle pressure/crisis situations	1	2	3	4	5	6
Personality compatible with working with people	1	2	3	4	5	6
Verbal communication skills	1	2	3	4	5	6
Written communication skills	1	2	3	4	5	6
Demonstrates appropriate assertiveness	1	2	3	4	5	6
Demonstrates an understanding of how he/she is perceived by others (self-awareness)	1	2	3	4	5	6

9. Describe notable STRENGTHS you believe the applicant possesses:

10. Describe notable WEAKNESSES you believe the applicant possesses:

Thank you for your cooperation.

Reference Name _____

Address _____ City _____

State _____ Zip _____ Day Phone Number _____

By signing below I acknowledge the above statements are true and correct to the best of my knowledge.

Reference Signature

Date



Hunt County Children's Advocacy Center Advocate Reference

PO Box 8692 Greenville, TX 75404

(903)454-9999 Fax (903)454-9990

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Reference Name_____

Address_____City_____

State_____ Zip_____ Day Phone Number_____

By signing below I acknowledge the above statements are true and correct to the best of my knowledge.

Reference Signature

Date



Hunt County Children's Advocacy Center
Advocate Reference

PO Box 8692 Greenville, TX 75404

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