



VOLUNTEER APPLICATION

Date _____

Name _____ DOB _____

What do you preferred to be called? _____

Address _____ City _____ State _____ Zip _____

Email _____

Phone _____

Emergency Contact _____ Phone _____

VOLUNTEERING INFORMATION

Do you have past volunteer experience?

Why did you choose Oasis Family Resource Center as the place to share your volunteer time?

What type of volunteer experience are you interested in?

I am motivated to volunteer because:

I am passionate about:

I am happy to help with:



I want to learn how to:

Please do not ask me to:

I thought you should also know:

Availability:

Date	<i>Sunday</i>	<i>Monday</i>	<i>Tuesday</i>	<i>Wednesday</i>	<i>Thursday</i>	<i>Friday</i>	<i>Saturday</i>
Time							

Do you have any special hobbies, interests or skills?

Have you had any personal or professional experience with domestic, sexual or child abuse and neglect? Please explain briefly.

INFORMATION ABOUT YOU

Employment Information – are you working now and if so where?

Education



References

Please provide three references with their names, phone number and email address.

1. _____
2. _____
3. _____

Some of the ways we utilize volunteers:

1. Mentoring women and children
2. Job Skills – resume writing, interview training
3. Life skills – cooking, cleaning
4. Office tasks
5. Answer phones
6. Data entry
7. Design and distribute materials in the community
8. Research information
9. Activities with children
10. Child care
11. Homework help
12. Sort donations
13. Help at the Second Chance Resale store
14. Fundraising/event helper
15. Auto repair – brakes, oil, belts
16. Lawn care and gardening
17. Haircuts
18. Manicure/pedicures/massages
19. Plowing/snow removal
20. Lawn care

Please return this application, the Confidentiality Policy, Release of Liability, Background Check Authorization and the State Background form WITH a copy of your driver's license to:

Cyndy Vogt
OASIS FAMILY RESOURCE CENTER
118 S. Mitchell Street
Cadillac, MI 49601
231-775-7299



CONFIDENTIALITY POLICY

This policy of confidentiality pertains to all staff and volunteers of Oasis Family Resource Center.

A consumer is any individual who receives services from agency staff or volunteers regarding domestic or sexual abuse or parenting programs.

1. All contact with consumers is considered confidential.
2. The counseling relationship and information obtained therein will remain confidential. Consumer information may only be shared with a signed release of information.
3. All written material and/or summaries of consumer contact must be maintained in the Oasis Family Resource Center office in a locked file cabinet.
4. This policy of confidentiality must be shared with all consumers upon intake.
5. Staff or volunteers personal phone numbers, last names or home addresses are not to be given out to consumers.
6. A signed release of information must be on file before any consumer information can be shared with another agency.

THIS POLICY OF CONFIDENTIALITY IS TO BE MAINTAINED AT ALL TIMES. VIOLATION OF ANY PART OF THIS POLICY MAY LEAD TO SUSPENSION OR TERMINATION OR EMPLOYMENT OR VOLUNTEER PARTICIPATION.

I hereby understand and agree to abide by this Policy of Confidentiality.

Signed _____ Date _____

Printed Name _____

Serves are available without regard to race, creed, color, religion, sex, national origin, handicap, sexual orientation, parental status, age, political affiliation or income level.



VOLUNTEER RELEASE OF LIABILITY

I, _____, my heirs, executors, administrators and assigns, do hereby release and forever discharge Oasis Family Resource Center, Second Chance Resale Store; its heirs, executors, administrators and assigns, of and from any and all actions, causes of actions, suits, damages, judgements, executions and demands for, upon or by reason of any damage, loss, personal injury, property damage, claims and demands whatsoever, in law or equity or otherwise, which heretofore has been or which hereafter may be sustained by me, my heirs, executors, administrations or assigns as consequence of volunteering my time and/or services to or at Oasis Family Resource Center, Second Chance Resale Store or shelter in any capacity whatsoever or at any location associated therewith.

**I HAVE READ THE FOREGOING RELEASE OF LIABILITY,
FULLY UNDERSTAND IT AND
FREELY AND VOLUNTARILY EXECUTE SAME.**

Signed _____ Date _____

Printed Name _____

Witness _____ Date _____



BACKGROUND CHECK AUTHORIZATION

*Please provide all information requested.
Please print clearly.*

Last Name _____

First Name _____ Middle Initial _____

Which of the following most accurately describes you?

- Female Male Non Binary Prefer not to say

Previous/Maiden Last Name _____

I hereby authorize and consent to a background check that includes, but is not limited to, my credit worthiness or similar characteristics, employment and education verifications, social security verification, criminal and civil history, DMB records, any public records or information bearing on my credit standing, credit capacity, character, general reputation, personal characteristics or trustworthiness as condition of consideration for employment, continued employment or volunteer work with Oasis Family Resource Center.

Signed _____ Date _____

Printed Name _____

CENTRAL REGISTRY CLEARANCE REQUEST

Michigan Department of Health and Human Services

Copy Photo ID Here

or

Attach a Separate Page

SECTION 1 INFORMATION ON PERSON BEING CLEARED

Name, (First, Middle, Last)	Signature Required for Individual Being Cleared		Date
Also Known as Name (AKA)	Social Security Number		Date of Birth
Address	City	State	Zip Code
Phone Number	Email		

I am completing this for myself. I would like to pick up my results in _____ County (For Michigan Residents Only).

SECTION 2 REQUESTER INFORMATION

Check Appropriate Box <input checked="" type="checkbox"/> Employer <input type="checkbox"/> Volunteer Agency <input type="checkbox"/> Adoption/Foster Care Home Screening <input type="checkbox"/> Court/Law-Enforcement/Department of Corrections/Prosecuting Attorney <input type="checkbox"/> Other			
Name of Agency or Organization OASIS/Family Resource Center		Name of Requester Amber Herlein	
Address 118 S Mitchell St	City Cadillac	State MI	Zip Code 49601
Email amber.herlein@cadillacoasis-frc.org	Fax 231-775-4074	Phone Number 231-775-7299	

Employers/Volunteer Agencies will ONLY receive responses of NO central registry if the person being cleared has approved this request with their signature. Employers/volunteer agencies will NOT receive notification if the name submitted has any central registry hits per CPL 722.627. For questions about completing this form, please contact the local Michigan Department of Health and Human Services, see attached contact list.

This clearance does not identify individuals who may have child abuse/neglect history in other states, territories or tribal trust land. The confidentiality of central registry information is protected by Sections 7 through 7j of the Michigan Child Protection Law (MCL 722.627-722.627j). Anyone who violates this protection is guilty of a misdemeanor and is civilly liable for damages.

The Michigan Department of Health and Human Services (MDHHS) does not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, genetic information, sex, sexual orientation, gender identity or expression, political beliefs or disability.

INSTRUCTIONS FOR FILLING OUT THE DHS-1929

Michigan Department of Health and Human Services

Michigan residents requesting clearance on themselves (You must possess a Michigan identification)

Complete section one and sign the form in the box provided. Include a copy of your Michigan picture identification (driver's license or passport are most acceptable). Please NOTE, the results will only be sent to the address on your picture identification. Submit your DHS-1929 form with identification to MDHHS for processing. See the attached list for MDHHS county office locations and contact numbers.

Michigan agencies, schools, preschool, daycare providers, employers and volunteer agencies

The person being cleared completes section one, signs the form and adds a copy of their picture identification (driver's license or passport are most acceptable). The requester completes section two with name of agency, name of requester, address, phone, email and fax number. Submit the DHS-1929 with identification to MDHHS for processing. See the attached list for MDHHS county office locations and contact numbers.

Individuals outside of Michigan

For out of state Individuals requesting clearance on themselves, complete section one and sign the form. Include a copy of your state picture identification (driver's license or passport are most acceptable). Please NOTE, the results will only be sent to the address on your picture identification. Submit your request to Michigan Department of Health and Human Services fax 517-763-0280.

Agencies, schools, preschool, daycare providers, employers and volunteer agencies outside of Michigan

For out of state agencies, the person being cleared completes section one, signs the form and adds a copy of their state picture identification (driver's license or passport are most acceptable). The requester completes section two with name of agency, name of requester, address, phone, email and fax number. Submit your request to Michigan Department of Health and Human Services fax 517-763-0280.

Out-of-State Adoption and Foster Home Screening

Please access our website at www.michigan.gov/MDHHS and follow the instructions for submitting an outstate request for adoption and foster home screening. For questions contact 517-284-9740.

Michigan Camp Volunteers and Employees (All Types)

Please contact the Department of Licensing and Regulatory Affairs, Bureau of Community Health Systems at 866-685-0006 or www.michigan.gov/lara
Submit completed form BCHS-camp 001 (Rev 1/16) to the address on the form.

Outstate government agencies requesting information, please access our website at www.michigan.gov/DHHS follow the links to child abuse and neglect or call 517-241-9794.

If a person is listed on central registry the results will only be sent to the individual at the address on their photo identification.

County	Address	Phone	Fax
Alcona	2145 E. Huron Rd., East Tawas, MI 48730	989-362-0300	989-362-6629
Alger	413 Maple St., Munising, MI 49862	906-387-4440	906-387-4710
Allegan	3255 122nd., Ste. 300 Allegan, MI 49010	269-673-7700	269-673-7795
Alpena	711 W. Chisholm St., Alpena, MI 49707	989-354-7200	989-354-7242
Antrim	203 E. Cayuga St., PO Box 316, Bellaire, MI 49615	231-533-8664	231-533-8740
Arenac	3709 Deep River Rd., Standish, MI 48658	989-846-5500	989-846-4365
Baraga	108 Main St., PO Box 10, Baraga, MI 49908	906-353-4700	906-353-8415
Barry	430 Barfield Dr., Hastings, MI 49058	269-948-3200	269-948-4101
Bay	1399 W. Center Rd., Essexville, MI 48732	989-895-2100	989-895-2494
Benzie	448 Court Plaza Govt. Ctr., PO Box 114, Beulah, MI 49617	231-882-1330	231-882-9078
Berrien	401 Eighth St., PO Box 1407, Benton Harbor, MI 49023	269-934-2000	269-934-2115
Branch	388 Keith Wilhelm Dr., Coldwater, MI 49036	517-279-4200	517-278-5346
Calhoun	190 E. Michigan Ave., PO Box 490, Battle Creek, MI 49016	269-966-1284	269-966-2837
Cass	325 M-62, Cassopolis, MI 49031	269-445-0200	269-445-0298
Charlevoix	2229 Summit Park Dr., Petoskey, MI 49770	231-348-1600	231-347-6211
Cheboygan	827 S. Huron St., Cheboygan, MI 49721	231-627-8500	231-627-8546
Chippewa	463 East 3 Mile Rd., Sault Ste. Marie, MI 49783	906-635-4100	906-635-4173
Clare	725 Richard Dr., Harrison, MI 48625	989-539-4260	989-539-4200
Clinton	105 W. Tolles Rd., St. Johns, MI 48879	989-224-5500	989-224-3896
Crawford	230 Huron Grayling, MI 49738	989-348-7691	989-348-2838
Delta	305 Ludington St., Escanaba, MI 49829	906-786-5394	906-786-5350
Dickinson	1401 Carpenter Ave. Ste. A, Iron Mountain, MI 49801	906-779-4100	906-774-2775
Eaton	1050 Independence Blvd., Charlotte, MI 48813	517-543-0860	517-543-2125
Emmet	2229 Summit Park Dr., Petoskey, MI 49770	231-348-1600	231-347-6211
Genesee	125 E. Union St., P.O. Box 1628, Flint, MI 48501	810-760-2550	810-760-2745
Gladwin	675 E. Cedar Ave., Gladwin, MI 48624	989-426-3300	989-426-3353
Gogebic	301 E. Lead St., Bessemer, MI 49911	906-663-6200	906-663-6230
Gd Traverse	701 S. Elmwood Ste.19, Traverse City, MI 49684	231-941-3900	231-941-0037
Gratiot	201 Commerce Dr., Ithaca, MI 48847	989-875-5181	989-875-2811
Hillsdale	40 Care Dr., Hillsdale, MI 49242	517-439-2200	517-439-2272
Houghton	47420 State Hwy. M-26 Ste. 62, Houghton, MI 49931	906-482-0500	906-487-7726
Huron	1911 Sand Beach Rd., Bad Axe, MI 48413	989-269-9201	989-269-9875
Ingham	5303 S. Cedar St., Lansing, MI 48911	517-887-9400	517-887-9500
Ionia	920 E. Lincoln, Ionia, MI 48846	616-527-5200	616-527-1849
Iosco	2145 E. Huron Rd., East Tawas, MI 48730	989-362-0300	989-362-6629
Iron	337 Brady Ave., PO Box 250, Caspian, MI 49915	906-265-9958	906-265-6390
Isabella	1919 Parkland Dr., Mt. Pleasant, MI 48858	989-772-8400	989-772-8460
Jackson	301 E. Louis Glick Hwy., Jackson, MI 49201	517-780-7400	517-780-7160
Kalamazoo	322 E. Stockbridge Ave., Kalamazoo, MI 49001	269-337-4900	269-337-5179
Kalkaska	503 North Birch St., Kalkaska, MI 49646	231-258-1200	231-258-4482
Kent	121 Franklin St. SE Ste. 200, Grand Rapids, MI 49507	616-248-1000	616-248-1059
Keweenaw	3616 Highway US-41, PO Box 351, Mohawk, MI 49950	906-337-3302	906-337-1131

County	Address	Phone	Fax
Lake	5653 S. M-37, Baldwin, MI 49304	231-745-8159	231-745-2930
Lapeer	1505 Suncrest Dr., Lapeer, MI 48446	810-667-0800	810-667-0795
Leelanau	701 S. Elmwood Ste. 19, Traverse City, MI 49684	231-941-3900	231-941-0037
Lenawee	1040 S. Winter St. Ste. 3013, Adrian, MI 49221	517-264-6300	517-264-6357
Livingston	2300 E. Grand River Ste. 1, Howell, MI 48843	517-548-0200	517-548-0298
Luce	500 W. McMillan, Newberry, MI 49868	906-293-5144	906-293-3857
Mackinac	199 Ferry Lane, Saint Ignace, MI 49781	906-643-9550	906-643-7467
Macomb	21885 Dunham Rd. Ste. 7, Clinton Township, MI 48036	586-469-7700	586-783-8136
Macomb	27690 Van Dyke Ave., Warren, MI 48093	586-427-0600	586-427-0668
Macomb	41227 Mound Rd. Ste. A, Sterling Heights, MI 48314	586-254-1500	586-254-8029
Macomb	19700 Hall Rd. Ste. A, Clinton Township, MI 48038	586-412-6100	586-412-6141
Manistee	1672 US 31 South, Manistee, MI 49660	231-723-8375	231-398-2106
Marquette	Courthouse Annex, 234 W. Baraga Ave., Marquette, MI 49855	906-228-9691	906-228-3393
Mason	915 Diana St., Ludington, MI 49431	231-845-7391	231-843-1430
Mecosta	800 Water Tower Rd., Big Rapids, MI 49307	231-796-4300	231-796-0799
Menominee	2612 10th St., Menominee, MI 49858	906-863-9965	906-863-7426
Midland	1509 Washington Ste. A, Midland, MI 48641	989-835-7040	989-835-7597
Missaukee	10641 W. Watergate Rd., Cadillac, MI 49601	231-779-4500	231-779-4507
Monroe	903 S. Telegraph Ste. A, Monroe, MI 48161	734-243-7200	734-243-1660
Montcalm	609 N. State, PO Box 278, Stanton, MI 48888	989-831-8400	989-831-8496
Montmorency	13210 M-33, Atlanta, MI 49709	989-785-4218	989-785-2302
Muskegon	2700 Baker St., PO Box 4290, Muskegon Heights, MI 49444	231-733-3700	231-733-3872
Newaygo	1018 Newell, PO Box 640, White Cloud, MI 49349	231-689-5500	231-689-5586
Oakland	51111 Woodward Ave., Pontiac, MI 48342	248-975-5400	248-975-5550
Oceana	4081 W. Polk Rd., Hart, MI 49420	231-873-7251	231-873-3803
Ogemaw	444 E. Houghton Ave., West Branch, MI 48661	989-345-5135	989-345-4688
Ontonagon	408 Cooper St. Ste. B, Ontonagon, MI 49953	906-884-4951	906-884-6323
Osceola	800 Water Tower Rd., Big Rapids, MI 49307	231-796-4300	231-796-0799
Oscoda	200 W. Fifth St., Mio, MI 48647	989-826-4000	989-826-3961
Otsego	931 S. Otsego Ave., Gaylord, MI 49735	989-732-1702	989-732-8715
Ottawa	12185 James St. Ste. 200, Holland, MI 49424	616-394-7200	616-395-5526
Presque Isle	164 N. Fourth St., Rogers City, MI 49779	989-734-2108	989-734-2767
Roscommon	111 Union St., Roscommon, MI 48653	989-275-5107	989-275-5545
Saginaw	411 E. Genesee, PO Box 5070, Saginaw, MI 48605	989-758-1100	989-758-2710
St. Clair	220 Fort St., Port Huron, MI 48060	810-966-2000	810-966-2025
St. Joseph	692 E. Main St., Centreville, MI 49032	269-467-1200	269-467-1229
Sanilac	515 S. Sandusky Rd., Sandusky, MI 48471	810-648-4420	810-648-4432
Schoolcraft	300 Walnut St. Rm. 175A, Manistique, MI 49854	906-341-2114	906-341-2110
Shiawassee	1720 E. Main St. Ste. 1, Owosso, MI 48867	989-725-3200	989-725-3308
Tuscola	1365 Cleaver Rd., Caro, MI 48723	989-673-9100	989-673-9209
Van Buren	57150 CR 681, Hartford, MI 49057	269-621-2800	269-621-2927
Washtenaw	22 Center St., Ypsilanti, MI 48198	734-481-2000	734-481-8386

County	Address	Phone	Fax
Wayne North	13233 Hamilton Ave., Highland Park, MI 48203	313-852-1700	313-852-1891
Wayne South	1801 E. Canfield Detroit, MI 48207	313-578-5500	313-578-5392
Wayne West	27540 Michigan Ave., Inkster, MI 48141	313-931-6400	313-931-6439
All Wayne	Visit www.michigan.gov/mdhhs for all offices		
Wexford	10641 W. Watergate Rd., Cadillac, MI 49601	231-779-4500	231-779-4507
Outstate	PO Box 30037, Ste. 510, Lansing, MI 48909-7537	517-241-9794	517-763-0280