



American Society of Women Accountants
Dallas Chapter

**VOLUNTEER
OPPORTUNITY**



Please join us as we volunteer with the YWCA of Metropolitan Dallas (YW) on **Saturday, May 15, 2011** for their annual YW Nurse-Family Partnership Spring Fling Event. The YW needs volunteers to help with set-up, decorating and participating in the event.

YWCA of Metropolitan Dallas is dedicated to addressing the most critical needs for women in Dallas, offering programs in the areas of pregnancy and parenting education, financial literacy and women's health services. YW's goal is to educate and guide women toward becoming self-sufficient and to advocate for sound public policy that supports these efforts.

Nurse-Family Partnership (NFP) is a relationship-based, free maternal and childhood health program that focuses on low-income, first-time mothers; - a vulnerable population segment that often has limited access to good parenting role models. Young mothers-to-be voluntarily enroll as early as possible, with nurse-home visits beginning ideally by the 16th week of pregnancy. Mothers and their highly educated Nurse-Home Visitors make a two-and one-half year commitment to each other, with 64 planned home visits between pregnancy and the child's second birthday. YW's NFP program helps break the cycle of poverty - empowered, confident mothers become knowledgeable parents who are able to prepare their children for successful futures. By developing strong family foundations, YW's NFP program establishes a better, safer, and stronger community for generations to come.

What: YW Nurse Partnership Spring Fling

When: Saturday, May 15, 2011; 8:00am – 1:00pm
8:00am Set-up & Decorating; Event begins at 10:00am

Where: Preston Hollow Presbyterian Church
9800 Preston Road
Dallas, TX
www.ywcadallas.org

Event Theme: Western

If you are interested in volunteering, please send an e-mail to aswa_dallas@yahoo.com. Please note all volunteers must complete a volunteer application by May 1, 2011 to volunteer in this event. See the following pages for the application.



YWCA OF METROPOLITAN DALLAS VOLUNTEER APPLICATION

Complete this form and return to the Metropolitan branch.

Return or mail to: YWCA of Metropolitan Dallas
Attn: Volunteer Coordinator
4144 N. Central Expressway, Suite 580
Dallas, TX 75204

Fax to: 214.826.4548

Email to: ludson@ywcadallas.org

Note: All applicants must be at least 16 years old. Applicants desiring to work within the children's & women's programs must be at least 18 years old. Applicant under 18 must have parental/guardian approval.

Date _____

Section I: Contact Information

Name: _____ Phone Number: _____

Address: _____

E-Mail: _____

Present Occupation/Employer: _____

Education: _____ Degrees: _____

*Age: _____ *Sex: _____ *Ethnicity: _____ *Bilingual: _____ *Handicapped: _____

*Age, sex, race, bilingual, handicapped are confidential and needed for statistical purposes on reports to the Community Council of Greater Dallas, United Way, and the National YWCA.

Section II: Availability

Time and days available to volunteer; indicate a.m., p.m., or both please:

Mon: _____ Tues: _____ Wed: _____ Thurs: _____ Fri: _____ Sat: _____

Section III: Experience

Volunteer Experience: _____

Section IV: Interests

What are your volunteer interests? _____

Section V: Skills

Special skills or certifications you want to share as part of your volunteer experience. Please include computer program knowledge, especially within MS Office:

Section VI: Summary

Briefly describe why you want to volunteer at the YWCA.

Section VII: References: May not be friends or family

Name: _____ **Phone Number:** _____

Address: _____ **Relationship:** _____

Name: _____ **Phone Number:** _____

Address: _____ **Relationship:** _____

Name: _____ **Phone Number:** _____

Address: _____ **Relationship:** _____

Are you or a family member an employee or participant in any YWCA program? _____

If so, which one? _____

Are you requesting volunteer hours to fulfill court-ordered Community Service Restitution? _____

If yes, please attach an explanation and include hours needed.

Signature: _____ **Date:** _____

Parent or guardian signature is required if the applicant is under 18.

Office use only.

Date Received by Volunteer Coordinator: _____

Interview Date: _____ Orientation Date: _____



**YWCA OF METROPOLITAN DALLAS
STATEMENT ON FELONIES OR MISDEMEANOR OFFENSES**

THIS STATEMENT IS REQUIRED BY STATE LICENSING.

Have you ever been convicted of a felony or misdemeanor, or are there any pending criminal charges against you, including deferred adjudication?

Yes _____ No _____

Are you seeking a volunteer opportunity in order to comply with court-ordered **Community Service** requirements?

Yes _____ No _____

If yes to either question, explain:

I understand that a Criminal History Check will be run, and that my continued volunteerism is subject to the results of this check.

X _____
Signature

X _____
Date

FIREARMS & OTHER WEAPONS POLICY

Effective January 1, 1996, persons residing in the state of Texas who are licensed by the state will be allowed to carry concealed handguns. While the Texas "Concealed Handgun Act" gives licensed individuals the right to carry concealed handguns, the Act allows employers to prohibit such persons from carrying a concealed handgun on property owned or controlled by the employer.

It is the policy of the YWCA of Metropolitan Dallas that carrying firearms (including handguns) or other weapons, concealed or otherwise, is prohibited on all YWCA premises, regardless of license to carry. YWCA premises is defined as buildings, driveways, walkways, parking lots, YWCA vehicles, lockers, desks, and files.

Violation of this policy will result in termination.

I acknowledge that I have read the above policy, and I agree to comply with this policy.

X _____
Volunteer Signature

X _____
Date



YWCA OF METROPOLITAN DALLAS EMERGENCY CONTACT INFORMATION

Please list person(s) to be contacted in case of emergency.

Name _____

Address _____

Phone # (H) _____ (W) _____

Relationship _____

CONFIDENTIAL INFORMATION

In the course of performing duties, the YWCA's volunteers may have access to highly sensitive and confidential information about the YWCA or its clients. All volunteers must use their best efforts and diligence to protect that information. It is expected that at no time will a volunteer disclose, directly or indirectly, sensitive or confidential information about the YWCA or its clients. Similarly, a volunteer whose assignment with the YWCA terminates, may not subsequently disclose, directly or indirectly, any sensitive or confidential information about the YWCA or its clients acquired during his or her association with the YWCA.

Any volunteer who violates the YWCA's Confidential Information policy will be subject to termination of their volunteer association with the organization.

I have read and understand the above policy and agree to abide by it.

X _____ **X** _____
Volunteer Signature Date