



## The Center Against Rape and Domestic Violence Volunteer Application Form

*I understand that completing this application does not automatically mean that I will be accepted into Volunteer Advocacy Training. I also understand that upon completion of the training, I will be evaluated and will not automatically be accepted as a CARDV Volunteer. I authorize CARDV to verify any information given in this application and I understand that I have an option not to fill out any information requested.*

Date: \_\_\_\_\_ Female: \_\_\_\_\_ Male: \_\_\_\_\_ Other: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Work Phone (if OK to call): \_\_\_\_\_

E-Mail: \_\_\_\_\_

Occupation: \_\_\_\_\_ Education: \_\_\_\_\_

### **The following information is optional:**

Ethnicity:     Latina/o     Chicana/o     Asian American     Caucasian

Native American     African American     Multi-racial     Other

If you are a woman of color, do you wish to be placed on the Women of Color Caucus mailing list for the Oregon Coalition Against Domestic and Sexual Violence?     Yes     No

### **PLEASE COMPLETE THE FOLLOWING QUESTIONS:**

1. What interests you about volunteering for CARDV?

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2. Volunteers are required to commit to working with CARDV at least six months with a minimum of 4 hours per week. Are you able to make this commitment?

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3. How did you hear about our volunteer opportunities and/or training?

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4. Do you speak any languages other than English? If yes, please specify.

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5. CARDV works with a diverse population of survivors. Please mark from the following list any situations that you would like to discuss further:

Advocating for:

- Incest survivors
- Male friends/family of survivor
- Clients wishing to terminate pregnancy
- People who are visibly angry or upset
- People with different ethnicities than yours
- People with a different sexual orientation than you
- Children who have been sexually abused
- People with alcohol and/or drug dependencies
- People with mental illnesses
- Other: \_\_\_\_\_

6. Have you ever been arrested for or convicted of any crime in any state, including but not limited to domestic or sexual violence? Please explain.

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7. Have you ever been served with a restraining or stalking order? Please explain.

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8. Have you ever received services from CARDV? Please explain.

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9. Have you experienced sexual assault or domestic violence in the last year, and if so, where are you in the healing process?

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10. Please provide the names and contact information for three references, either professional or personal.

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## Volunteer Application Questions

*Please answer the following questions to the best of your ability. We are aware that most applicants will not be fully knowledgeable in all areas. Please feel free to attach additional paper if necessary.*

1. How do you define sexual assault?

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2. Who is responsible for preventing sexual assault?

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3. What do you think are some reasons why someone would abuse their partner?

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4. Why do you think a person would stay with an abusive partner?

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5. What feelings do you think children experience when they leave an abusive situation?

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6. What are your ideas about disciplining children?

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7. How would you talk with a woman who was asking about an abortion, placing a child for adoption, or raising and child on her own?

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8. What is your understanding of the word “confidentiality”?

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9. Please tell us about the diverse populations with whom you have worked.

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10. What strengths do you bring to CARDV? In what areas do you need skill building or professional development and training?

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