



VOLUNTEER SUPERVISED VISITATION MONITOR APPLICATION

Thank you for your interest in volunteering your time at Joyful Connections. Please answer the following questions.

Name: _____

Address: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Best time to call: _____

How did you hear about Joyful Connections?

What interests you about Joyful Connections and volunteering in an agency that serves families and children?

If you have volunteered in the past, please describe the agency/organization and the duties you performed, and how long you volunteered for the agency/organization.

Are you currently employed? If so, where, and what is your work schedule? *

How often would you like to volunteer as a visitation monitor? *

Weekly___ Monthly___ Other___ explain_____

Number of hours_____ Days you are available _____

**Joyful Connections' current hours of service are flexible and do vary. Most of our visits take place on Tuesday, Wednesday, Thursday, Saturday morning, and Sunday.*

Joyful Connections has a responsibility to protect the safety and security of all clients, especially the children. Therefore, we require a background check, and we must ask all applicants several questions about their background.

Please provide 3 references and include name, address and phone number.

_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever had a substantiated abuse finding, or child neglect investigation, through Children's Services that involved your immediate or extended family? If yes, please explain.

Have you ever been charged with and/or convicted of a felony or a misdemeanor that involved domestic violence, assault, substance abuse, theft or a similar offense? If yes, please explain.

All volunteers must provide/complete and pass a BCII check. Joyful Connections will assume the cost *unless the volunteer would like to pay this fee as a donation to Joyful Connections*. BCII checks will be requested only after the volunteer has met with the director and references have been contacted.

Signature_____Date_____

Please return your completed application to:

Joyful Connections
8200 W. State Rt. 163
Oak Harbor, OH 43449