

**YWCA OF GREATER MEMPHIS  
ABUSED WOMEN'S SERVICES  
VOLUNTEER JOB DESCRIPTION**

- Title:** Volunteer
- Responsible To:** Community Education Director
- Job Summary:** To assist YWCA Abused Women's Services staff with the day to day shelter/agency operations.
- Objectives:**
- To become familiar with shelter, staff, and organizational structure
  - To understand policies and procedures.
  - To understand the purpose and use of documentation and forms.
  - To become familiar with other agencies and resources.
  - To respond to crisis phone calls and request for referrals.
  - To provide reflective listening to the women and children in the shelter
  - To help maintain a clean and orderly environment.
  - To perform other duties as needed.
- Obligations:**
- Commitment to time as scheduled.
  - Open communication of questions and concerns.
  - Additional reading and training as may be necessary.
  - Adherence to AWS policies and procedures.
- Qualifications:**
- Personal Interview
  - 3 letters of reference
  - Copy of Driver's License
  - Pre-Service Training
  - In-Service Training
  - Criminal Background Check
- Length of Commitment:** **6 months**



**YWCA Of Greater Memphis**

**766 S. Highland Street  
Memphis, TN 38111**

**Volunteer Application**

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
(last) (first) (middle) (nickname)

Address: \_\_\_\_\_  
(City) (State) (Zip)

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Birth Date: \_\_\_\_\_

E-mail address: \_\_\_\_\_

What interests you about volunteering at the YWCA?

What areas of volunteer service interest you? (You can refer to the volunteer work description page or create a personal description of what you'd like to do.)

Special skills, hobbies, and interests: \_\_\_\_\_

Name of Company/Organization (If Applicable) \_\_\_\_\_

Business Address: \_\_\_\_\_  
(street) (city/state) (zip code)

Your Title: \_\_\_\_\_ Worked From \_\_\_\_\_ to \_\_\_\_\_

Supervisor's Name/Title: \_\_\_\_\_ Phone #: \_\_\_\_\_

Educational Background:  
College/University/Area of Study (to identify possible skill areas)

Other special training (describe):

**CONFIDENTIALITY STATEMENT**

Please read the following statements, fill in your name (print), and sign:

I, \_\_\_\_\_, am willing and able to keep information regarding staff, volunteers, and program participants confidential. Additionally, if I accept an assignment to work in the Abused Women’s Shelter, I agree to not disclose the shelter location.

\_\_\_\_\_  
(signature)

**REFERENCES**

We ask that you provide three references that can speak of your professional or personal character, for which, you will be given the forms. DO NOT use family members. Please provide at least one professional reference. Due to issues our families face, we screen potential volunteers for ethical conduct, reliability, and ability to handle sometimes-stressful situations.

Because of our grant requirements, we do a criminal background check on each volunteer that works with women and children and need a copy of a picture I.D. and your social security card. You will also be required to sign a criminal background check release form.

Are you bilingual? \_\_\_\_\_ If so, what language \_\_\_\_\_

\_\_\_\_\_  
*Applicant’s Signature*

\_\_\_\_\_  
*Social Security Number*



YWCA OF GREATER MEMPHIS  
ABUSED WOMEN'S SERVICES  
VOLUNTEER REFERENCE

TO: \_\_\_\_\_ RE: \_\_\_\_\_  
(Reference's Name) (Volunteer/Applicant's Name)

Address: \_\_\_\_\_  
(Reference's Information)

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone # \_\_\_\_\_  
(Reference's phone #)

I authorize the release of information as specified below to the YWCA.

Date: \_\_\_\_\_  
(Reference's Signature)



The prospective volunteer who signed above has listed you as a reference in her application to serve as a volunteer at the YWCA Abused Women's Services. Please return this completed form to **YWCA, AWS, c/o Kathleen Ivey, 766 S. Highland, MEMPHIS, TN. 38111**. If you have any questions feel free to call me at (901) 323-2211. Thank you for your cooperation.  
Kathleen Ivey

- 1. How long have you known this person? \_\_\_\_\_
- 2. What is your relationship? \_\_\_\_\_

	Yes	No	Don't know
3. Would you enjoy working alongside this person in a helping environment?	_____	_____	_____
4. Does this person follow through on commitments?	_____	_____	_____
5. Do you consider this person flexible?	_____	_____	_____
6. Does this person work well with people?	_____	_____	_____

7. Additional comments:



**CRIMINAL BACKGROUND CHECK  
AUTHORIZATION**

NAME (Print) \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

SOCIAL SECURITY NUMBER \_\_\_\_\_

MAIDEN NAME (If Female) \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY/STATE/ZIP CODE \_\_\_\_\_

*By signing this form, I authorize the YWCA of Greater Memphis to conduct a thorough Criminal Background check on me.*

Signature \_\_\_\_\_

Date

*for office use only*

\_\_\_\_\_  
DATE

CBC Submitted

\_\_\_\_\_  
DATE

CBC Report Received