

APPLICANT INFORMATION

Name:

Date of birth:	SSN:	Email:
----------------	------	--------

Current address:

City:	State:	ZIP Code:
-------	--------	-----------

Driver License #:	Home Phone:	Cell Phone:
-------------------	-------------	-------------

Have you EVER been convicted of ANY criminal offense? YES NO

I hereby authorize Wow Utah Inc. to do a background check. Signature _____ Date _____

Have you ever been accused of or charged with being a child abuser and/or domestic violence? YES or NO
Please Explain:

Have you ever been convicted of domestic violence? YES or NO

Have you ever been a part of WOW? If so, what role did you participate in?

EMERGENCY CONTACT

Name:

Address:	Phone:
----------	--------

City:	State:	ZIP Code:
-------	--------	-----------

Relationship:

AVAILABILITY

Please rank your available hours (1 = most available to 10 = least available)

Weekday mornings	Weekend mornings
Weekday afternoons	Weekend afternoons
Weekday evenings	Weekend evenings

INTERESTS/HOBBIES	STRENGTHS/SKILLS

Please list any, and all, volunteer, mentorship or leadership experience. Please discuss a success you had during the experience.

(Mentors are required to attend ALL WorthShops listed below.) Please check the dates carefully, as our women depend on the consistency of you attending to set an example for them. Thank you!

PROGRAM DATES REQUIRED

<p>Jan. 3, Day One:</p> <ul style="list-style-type: none"> • Before Photos – All Women of Worth participants receive a sweatshirt to wear. However, please dress comfortably • Welcome and Grounding • Life skills training • Goals and commitments • Lunch /Dinner • Meet and greet with mentee • Guest Speaker – Evening session 	<p>Jan. 4, Day Two:</p> <ul style="list-style-type: none"> • Ah Ha moments • Journaling and moving forward • Reflection time – Gratitude • Panel of courageous women of worth • Lunch • Mentors and Mentee time
--	--

Additional Dates of Commitments

****The FIRST Weekend of Every Month till JULY the remainder is the SECOND weekend of the month. This is addition to meeting once monthly in person with your mentee and weekly check-ins.**

<ul style="list-style-type: none"> • February 1st – Vision books • March 7th Chad Hymas • April 3-4th The WoW Factor • May 2nd - Mindfulness • June 6th- Soul Signature 	<ul style="list-style-type: none"> • July 11th – Day of Service • August 8th- Picnic for WoW Family past and present • September 12th- Shopping Spree • October 10th- Refuse to be a Victim • November 14th - Gala & Silent Auction Event
---	---

8th Annual Gala & Silent Auction – November 14th

***Food is provided at WorthShops.**

Do you have any special dietary needs? If so, please list below:

EMPLOYMENT

Employer	Job title	1 success

Do you have a relationship with anyone currently applying for the program?

Yes or No

If yes: Who and relationship.

Are you under a physician's or therapist care?

Yes _____ **No** _____

Are you on any medications or have a medical condition we should be aware of?

Yes _____ **No** _____

REFERENCES

Name	Email	Phone

PHOTO RELEASE AND SIGNATURE (REQUIRED UNLESS APPROVED OTHERWISE)

The under signed hereby grants WoW Utah permission to take or have taken still and moving photographs and films, including television pictures and consents and authorizes WoW Utah, it's advertising agencies, news media, and any other persons interested in WoW Utah and its work to use and reproduce the photographs, films, or pictures and to circulate and publicize the same by all means, including but not limited to, newspapers, television media, brochures, pamphlets, instructional materials, books, and clinical mailings _____

CONFIDENTIALITY AGREEMENT AND SIGNATURE (REQUIRED)

All information provided by a Woman of Worth or staff member to any other staff member or volunteer is considered to be confidential and is subject to the terms of the Organization's confidentiality policy. Confidentiality is defined, as the assurance that unwarranted access to information regarding a Woman of Worth shall be protected from improper disclosure. I understand that any violation of this, including possible also the disclosure of an event's location, shall be considered a breach of faith. I understand that any violation of this policy is grounds for termination of my volunteer relationship with WoW Utah. * _____

AGREEMENT AND SIGNATURE (REQUIRED)

I hereby certify that the information provided on this application is accurate to the best of my knowledge and subject to verification by WoW Utah. I authorize the schools, persons, previous employers, agencies and other organizations named in this application to provide WoW Utah (it's authorized employees, agents, or representatives) with any relevant information that may be required to arrive at a volunteer placement decision and hereby release any such schools, persons, previous employers, agencies, and other organizations from any and all liability which they might otherwise incur as a result. I understand that any misrepresentation or omission of a material fact on my application may be justification for refusal of placement. I hereby give my permission to WoW Utah to obtain any information relating to my criminal history record if the need for such is found under according to the WoW Utah policies. I understand that this information will be used to determine my eligibility for a volunteer position with this organization. I also understand that as long as I remain a volunteer here, they may repeat this criminal history check at any time. I am willing to submit to a drug test at will and understand that drug use can be cause for dismissal as a Mentor or Volunteer. In the event that I volunteer, I understand that all volunteers are subject to dismissal at the discretion of WoW Utah. I understand that Volunteering with Wow Utah is an inappropriate forum for solicitation of for-pay-clients among the Women of Worth and that any professional services are to be donated as Pro-Bono. If, in the event I choose to cease volunteering, I am free to do so at any time. I also understand that if selected to volunteer, any misrepresentation I have made by completing this application shall be considered as sufficient cause for my dismissal without advance notice. I authorize WoW Utah to supply my volunteer record, in whole or in part, and in confidence to any prospective employer, government agency, or other party with a legal and proper interest. In the event of my selection, I will comply with all of the rules and regulations as set forth by WoW Utah. I understand that the completion of this form does not guarantee my status as a volunteer. I must meet all stated conditions required of the position for which I am asking to be placed. I have read the above statements and accept the same as a condition of my placement with WoW Utah. * _____

Sign and Date _____