



Rebuilding Together Baltimore
1014 W. 36th Street
Baltimore, MD 21211
Phone: 410-889-2710
Fax: 443-586-0785
www.RTBaltimore.org

Volunteer Application

Personal Information:

NAME: _____ BIRTHDAY: _____
(First) (Middle) (Last) (Month/ Day/ Year)

CURRENT HOME ADDRESS: _____
(Address) (City) (State) (Zip)

HOME PHONE: _____ CELL PHONE: _____ FAX: _____

EMAIL ADDRESS: _____ BEST WAY TO BE REACHED: _____

OCCUPATION: _____ CURRENT EMPLOYER: _____

Please check any of the following skills you may have:

- Window Repair Plumbing Electrical Carpentry Masonry Plaster/ Drywall Concrete
 Extermination Locksmith Lead Safety Roofing Glazing Weatherization/ energy Efficiency
 Other _____

Are you licensed in any of these fields? Yes No If yes, in what? _____

Have you ever been convicted of a crime? Please do not include traffic violations. (If yes, please explain the nature of the crime and the date of the conviction and disposition.) _____

Rebuilding Together Important Information:

Volunteer Records

Volunteer applications are kept confidential and used for the purposes of Rebuilding Together Only. Personally identifiable information is not sold or shared with others except as may be required by law.

Confidentiality

Volunteers frequently have access to personal information about the homeowners served by Rebuilding Together. Every volunteer, regardless of his or her position, must consider such information strictly confidential.

Drug/Alcohol Use

Volunteers are prohibited from using or being in the possession of illegal drugs or being under the influence of alcohol while servicing in a volunteer capacity.

Diversity

Volunteers are asked to respect the diversity of our clients (homeowners and their families) and other volunteers by refraining from discrimination against anyone based on religion, race, gender, age, ethnicity, country of origin, or sexual orientation. Volunteers are not permitted to engage in the preaching or teaching of any particular religious or personal beliefs.

Sexual Harassment/Misconduct

Under no circumstances does Rebuilding Together tolerate any form of sexual harassment or behavior that creates an intimidating, hostile, or offensive environment.

Safety and Liability

All volunteers are responsible for their own safety. If a safety incident should arise, it should be reported immediately to a Rebuilding Together board or staff member, in accordance with Rebuilding Together's Incident Reporting Procedures.



VOLUNTEER AGREEMENT AND INFORMATION COMPLIANCE

Please read the following carefully before signing this application. All sections below must be completed.

1. **Rebuilding Together Important Information:** I understand the aforementioned policies and their implications, and I will abide by these terms and conditions if I am chosen to be a Rebuilding Together Baltimore volunteer.
2. **Information/ Background:** I understand that this is an application for and not a commitment or promise of volunteer opportunity. I certify that I have and will provide information throughout the selection process, including on this application for a volunteer position and in interviews with Rebuilding Together Baltimore that this is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that Rebuilding Together Baltimore will verify information contained on my application. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with Rebuilding Together Baltimore or my terminations as a volunteer.

SIGNED this _____ day of _____, 20____, in Baltimore, Maryland.
(month)

_____	_____
Volunteer Name (Please Print)	Witness (Please Print)
_____	_____
Volunteer Signature	Witness Signature

I hereby attest that I have never been convicted of a felony.

SIGNED this _____ day of _____, 20____, in Baltimore, Maryland.
(month)

_____	_____
Volunteer Name (Please Print)	Witness (Please Print)
_____	_____
Volunteer Signature	Witness Signature

Please return the completed application to:
Amanda Malone, Rebuilding Together Baltimore, 1014 W. 36th Street, Baltimore, MD 21211
Phone: 410-889-2719 Fax: 443-586-0785 Email Info: www.rtbaltimore.org/staff.html