



Supervisor's Message

Dear Volunteer:

Welcome!

Waukegan Township is a community service-oriented agency established in 1849. It has a rich history and reputation of outstanding community outreach. Our goal is to enhance the quality of life for all Waukegan Township residents by offering programs which assist residents in gaining and maintaining self-sufficiency and independent living. We thank you and greatly appreciate you for choosing to contribute your valuable skills and enthusiasm to our program.

Volunteers provide an important link between Waukegan Township, participants and the community bringing in a variety of capabilities, skills and knowledge. Volunteers provide extra resources to better accomplish our mission and goals.

Through the volunteer program, Waukegan Township hopes to enrich the lives of its participants, making a positive impact, providing opportunities to learn new skills, enhancing existing skills and stimulating the satisfaction that come from giving of one's self.

We are extremely pleased and thank you for volunteering in our program and we look forward to working together. A warm welcome from all of us at Waukegan Township!

"Those who bring sunshine to the lives of others cannot keep it from themselves," - James Matthew Barrie.

Sincerely,

PATRICIA JONES

Waukegan Township Supervisor

Guidelines for Volunteers

Waukegan Township appreciates your willingness and commitment to donating your time and talents to our programs. Volunteers make a significant difference and we thank you for your participation in any or all volunteer activities. As a volunteer you are an ambassador of Waukegan Township and are expected to comply with applicable policies, procedures and guidelines designed to maintain a positive image of Waukegan Township and to facilitate safe and efficient use of our volunteer services. Persons wishing to volunteer for Waukegan Township must agree and comply with the following terms and conditions. These guidelines are designed to assist you in having a meaningful and productive volunteer experience:

- When in doubt, ask for help – The supervisor responsible for the volunteer assignment at the site can best assist you with questions or problems that might arise.
- Be punctual and responsible – Although you are volunteering your time, you are participating in the organization as a reliable, trustworthy and contributing member of the team. The program where you are assigned, rely on your punctuality and commitment to complete its assignment.
- Be appropriate – You are in a work situation and are expected to treat your supervisor, co-workers and clients with courtesy, respect and kindness.
- Dress comfortable, neatly and appropriately.
- Be flexible – The event or the activity is not always predictable. Your flexibility to changing situations can assist the operation to run smoothly and produce a positive outcome.
- Call if you anticipate being late or absent – The site will come to depend on your contributed services and will be at a loss if you fail to come in as scheduled. Be mindful of their needs.
- On the other hand:
 - Never report under the influence of drugs or alcohol.
 - Never display gang activity or gang paraphernalia.
 - Never bring headbands, headphones, radios, CD's or wear do-rags.
 - Maintain your cell phones in silent mode and do not answer or make phone calls during the site assignment.
 - Use common sense and conduct yourself in a professional manner at all times.
 - Respect the property of Waukegan Township and the property of all of those working around you.
 - Follow all safety rules and guidelines at all time and notify the site supervisor of any injuries or accidents that may occur at the site. Do not endanger yourself or others.

I agree to serve as a volunteer for Waukegan Township. I will observe the ordinances, policies and procedures of Waukegan Township while I am volunteering. I agree and understand that I am responsible for complying with supervisory directives from Waukegan Township for the event or program which I agree to volunteer for. I understand that I may terminate my volunteer services for Waukegan Township at any time and for any reason, with or without notice, and Waukegan Township retains the same right.

Volunteer Signature

Date

Volunteer Waiver of Liability

In consideration of the opportunity afforded to me to assist on a voluntary basis in a variety of areas at Waukegan Township and its programs, which include but are not limited to this project.

As a volunteer, I recognize and acknowledge that there are certain risks of physical injury in any volunteer activity, and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of the severity that I may sustain as a result of my volunteer service.

I have read and understand the above agreement and waiver and release of all claims and assumption of risk and agree to its terms.

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone # _____

Email address _____

Emergency Contact _____

Phone # _____

Signature _____ Date _____

Parent or Guardian consent if under 18 years old

Parent or Guardian Name _____

Signature _____ Date _____

Waukegan Township Volunteer Application

Name _____ Date _____

Address _____

Telephone # _____ Cell # _____

Email _____

List of Volunteer experience:

Place _____ Length of time _____

Description of duties _____

Place _____ Length of time _____

Description of duties _____

List work experience:

Place: _____ Length of employment _____

Position _____

Reason for leaving _____

Place: _____ Length of employment _____

Position _____

Reason for leaving _____

List special skills or talents:

Educational Background:

School _____

Highest grade completed _____

Degree/Trade _____

Currently enrolled in school at _____

Majoring in _____

Internship Yes No If yes, indicate amount of hours _____

High School Diploma GED Certificate College graduate

Training Certificate did not graduate

Availability for volunteering:

Days available:

Monday__ Tuesday__ Wednesday__ Thursday__ Friday__ Saturday__ Sunday__

Hours per day Hours per week Hours per month

Day Evening Weekends Holidays

Own transportation? Yes No

Emergency Contact:

Name _____ Phone # _____

Relationship _____

References

List three people not related to you who have definite knowledge of your qualifications.

Name _____

Address _____

Telephone # _____

Name _____

Address _____

Telephone # _____

Name _____

Address _____

Telephone # _____

Additional Information:

Authorization and Agreement

I authorize Waukegan Township to contact listed references, investigate criminal background and to contact the Illinois Department of Children Family Services to conduct a search of the Child Abuse and Neglect Tracking System and that all information will be kept under strict confidentiality and should only be discussed with authorized staff.

I understand that I must be officially accepted before I begin my volunteer service. I understand that misrepresentation or omission of facts requested in this application is cause for rejection as a volunteer with Waukegan Township.

I agree to fulfill the responsibilities of the volunteer assignment to the best of my ability. I understand that failure to comply with the rules may lead to dismissal from my volunteer assignment.

Signature

Date