

DOMESTIC VIOLENCE COURT OF ST. LOUIS COUNTY

VOLUNTEER/INTERNSHIP APPLICATION

Volunteer Victim Advocates for the DV Court assist individuals who have experienced abuse with Orders of Protection (O.P.) both in court and the filing office. Volunteer Victim Advocates help explain the filing and court process, assist with safety planning and provide support, information, and community referrals.

It is the policy of the Domestic Violence Court of St. Louis County to provide equal opportunity to all applicants based on qualifications and abilities and without regard to Military status, race, ethnicity, gender, age, marital status, sexual orientation or disability.

PERSONAL HISTORY

Date _____

Name _____
(First) (Middle) (Last)

Home Address _____
(Street) (City) (Zip)

Cell Phone _____ Home Phone _____

Work Phone _____

E-Mail Address _____

Date of Birth _____

Marital Status _____ (optional) Race/Ethnicity _____ (optional) Gender _____ (optional)

Emergency Contact _____
(Name) (Phone Number) (Relationship to Applicant)

EDUCATION

Tell us about your education, starting with high school and any college, graduate or post-graduate work you have completed.

<u>School</u>	<u>Degree/Major(s)</u>	<u>Year Graduated</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

WORK AND VOLUNTEER EXPERIENCE

Tell us about your work experience, both paid and volunteer. Start with your current occupation and list in reverse chronological order your employment and volunteer experience for the last 4 years. Please also attach a resume if you have one.

Dates Employer/Organization Job Title FT/PT/Volunteer

**Please explain your reasons for leaving the above organizations, if applicable.*

Where or from whom did you hear about volunteer opportunities with the Domestic Violence Court of St. Louis County?

What days and times are you typically available to volunteer?

Note: All volunteer opportunities take place between 8am and 5pm Monday through Friday at 105 S. Central Ave. in Clayton.

Monday	Tuesday	Wednesday	Thursday	Friday

Please add any additional information needed about your availability:

Would you be able to commit at least one year to volunteering at the Domestic Violence Court of St. Louis County? If not, please explain.

{Please ONLY complete the following section if applying for an internship/practicum}

Hours needed to complete internship/practicum: _____

(Please circle the semester(s) for which you are applying. Two semester internship/practicum is preferred)

Fall/Spring Semester Spring/Summer Semester Summer/Fall Semester Summer

Please list three references familiar with your previous work, education, or volunteerism.

1. Name: _____ Phone or email: _____
2. Name: _____ Phone or email: _____
3. Name: _____ Phone or email: _____

SPECIAL INTERESTS & ACTIVITIES (i.e. professional, social, recreational, civic organizations)

PRELIMINARY SCREENING/BACKGROUND INFORMATION

Have you ever been charged or convicted of a violation of any law other than minor traffic violations?

No ___ Yes ___

If so, give details including date, place, nature of offense and disposition in the space provided below:

(Applicants with misdemeanor or felony charges will be evaluated on a case-by-case basis, considering the time passed since the incident and the degree of seriousness of the charge.)

Have you even been the subject of a child abuse/neglect investigation? No ___ Yes ___

If so, please explain:

Have you ever been a victim of a crime? No ___ Yes ___

If so, please explain:

STATEMENT OF REQUIRED TRAINING

If accepted into the Domestic Violence Court Volunteer Program, I agree to attend all training as required and understand that I cannot assume the duties of a Volunteer Victim Advocate until completion of the training.

STATEMENT OF VOLUNTEER SERVICE

I understand that information contained in this application is for use by the Domestic Violence Court of St. Louis County. I understand that the Domestic Violence Court of St. Louis County will complete a criminal record check and child abuse/neglect record check.

STATEMENT OF CONFIDENTIALITY

I understand that the information that I receive or hear in performing my duties as a Volunteer Victim Advocate is confidential. I agree to keep this information in strict confidence, sharing it only with persons as set forth by Missouri law.

STATEMENT OF INTENT

I wish to apply to become a Volunteer Victim Advocate for the Domestic Violence Court of St. Louis County. I have read and understand the above **STATEMENT OF REQUIRED TRAINING, STATEMENT OF VOLUNTEER SERVICE** and **STATEMENT OF CONFIDENTIALITY**, and I have filled out this application accurately and completely. I certify that I am at least 18 years of age and have a high school diploma or equivalent.

Signature of Applicant

Date

