



ST. JUDE'S RANCH FOR CHILDREN

with help comes hope



VOLUNTEER APPLICATION

MISSION STATEMENT

St. Jude's Ranch for Children rescues abused, abandoned and neglected children of all races and faiths from the vicious cycle of child abuse. We provide healing and nurturing in a safe home-like environment where children can learn life skills to start new lives with new chances, new choices and new hope.

VISION STATEMENT

To break the vicious cycle of child abuse by providing home and healing wherever children are hurting.

CORE VALUES STATEMENT

Our actions are inspired by the following core values:

- Joyful trust in the Lord
- A sense of humor
- Honesty, Trustworthiness and Loyalty
- Exceptional service to children, staff, donors and community
- Professionalism through discipline, accountability and fiscal responsibility
- Rearing children to achieve their full potential
- Providing healing one child at a time
- Building a better society



Dear Volunteer Applicant:

Thank you for your interest in volunteering at St. Jude's Ranch for Children!

St. Jude's Ranch is committed to the delivery of the highest quality program services to our children. In order to help us accomplish that with our volunteers, we carefully screen each volunteer to best match their experience and talents with our needs while ensuring a safe and caring environment for the children. Volunteers must be at least 21 years of age and commit to volunteering for at least two hours per week on a regularly scheduled basis for a minimum of six months so we can have smooth operations in volunteer areas.

Volunteers are a vital part of daily operations at St. Jude's Ranch for Children. Choosing to donate your time can make a big difference in the lives of our children and be very fulfilling for you, as well.

There are a number of steps to becoming a volunteer and we thank you for your patience, as the process may seem a bit onerous—but we are sure you understand the strict requirements we must implement to make sure the children are protected.

1. Complete the Volunteer Application
2. Obtain a copy of your (1) state issued identification (i.e. driver's license or other government-issued identification); and (2) Social Security card
3. Return the completed packet with a copy of state issued identification and Social Security card to the campus where you wish to volunteer through the US Mail or by hand delivery (visit www.stjudesranch.org or the timeline in the back of this packet for campus locations).
4. Once your application is received, you will be contacted to schedule an interview and tour the campus. (Please note a background check and, in some case, fingerprinting with the state Department of Family Services may be required to by state licensing requirements).
5. Once complete, we will contact you to schedule your volunteer orientation and schedule so your rewarding journey may begin!

Again, on behalf of St. Jude's Ranch for Children and the kids entrusted to our care, we thank you for your interest and time. Should you have any questions throughout this process, please contact the Volunteer Supervisor located within the state of your desired campus. We look forward to receiving your application.





ST. JUDE'S RANCH FOR CHILDREN

with help comes hope

Volunteer Application

Name

FIRST MIDDLE LAST

Address

City **State** **Zip**

Email Address

Phone Number (s)

Home

Cell

Other

What is your preferred contact method?

When is the best time to contact you?

Employment/Volunteer History

Company name

Title

Dates employed from to

Company name

Title

Dates employed from to

Company name

Title

Dates employed from to

Volunteer Information

What type of volunteer work are you interested in?

- Full Time
- Part Time
- Event Specific
- Seasonal
- Other

Please check all interests/skills

- | | |
|--|--|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Landscaping |
| <input type="checkbox"/> Chapel Preparation/Services | <input type="checkbox"/> Cleaning |
| <input type="checkbox"/> Office Duties (general) | <input type="checkbox"/> Computer/Graphic Design |
| <input type="checkbox"/> Open, sort, distribute mail | <input type="checkbox"/> Paint/Varnish |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Data/Database Entry |
| <input type="checkbox"/> Sewing | <input type="checkbox"/> Donor Correspondence |
| <input type="checkbox"/> Sorting Donated Items | <input type="checkbox"/> EBay Sales/Purchase |
| <input type="checkbox"/> Gift Shop/Museum Attendant | <input type="checkbox"/> Other |
-

Structured interactions

- Teaching/Tutoring – list qualifications
- Activities

What location (s) are you interested in volunteering at?

- Boulder City Bulverde New Braunfels

How did you hear about us?

Applicant Statement:

I certify that all information I have provided in order to apply for a volunteer position at St. Jude's Ranch for Children is true and correct.

I expressly authorize, without reservation, St. Jude's Ranch for Children to contact and obtain information from all references, employers, and educational institutions in order to verify the accuracy of all information provided by me in this Volunteer Application.

I certify that I have read, understand and accept the Applicant Statement.

<input type="text"/>	<input type="text"/>
Signature of Applicant	Date

APPLICANT REFERENCE VERIFICATION FORM – PERSONAL REFERENCE

Applicant Name: _____
Last First Middle

Other Names Used (Maiden, etc.) _____

Name of Personal Reference: _____

Address: _____ City/State/Zip _____

Telephone: (____) _____ Fax: (____) _____ Source: Written Telephone

Relationship of Reference: Friend Relative Spouse Other: _____

Applicant Statement: I authorize the release of information to St. Jude’s Ranch for Children any information held by any parties regarding my previous employment or scholastic records and hereby release said persons, schools, companies, governmental agencies, court and law enforcement authorities from any damage whatsoever for releasing this information.

Applicant Signature: _____ Date: _____

(APPLICANTS – DO NOT WRITE BELOW THIS LINE)

St. Jude’s Representative Statement: The individual listed is applying for employment with St. Jude’s Ranch for Children. Our facility provides care to abused, neglected and abandoned children. To assist us in ensuring good employment practices, please furnish the information requested below. **Any and all information will be held in the strictest confidence and not divulged to the applicant.** Your reply will be greatly appreciated.

St. Jude’s Representative Signature: _____ Date: _____

PERSONAL REFERENCE SECTION

What is your relationship to the applicant? _____ how long have you known? _____

To your knowledge what kind of experience have this person had with children both professionally and personally?

What three adjectives would you use to describe this person? (Examples: Outgoing, Shy, Etc.)

What are the major interests or activities that this person is involved with? (Examples: Church, Clubs, Sports, Etc.)

How would you describe this persons interpersonal relationships or community involvement using the following descriptions:

(Please check all that apply)

- Active in the community
- Keeps several close and casual friends
- Keeps few or no close friends
- Some or no direct community involvement
- Keeps a small group of close friends
- Involved primarily with immediate family

Are you aware of any problem behaviors in this person? (Excessive alcohol use, drug abuse, gambling, mental illness, etc)

Yes No. If yes, please describe: _____

St. Jude’s Ranch for Children provides a supportive, caring, and secure environment to abused, neglected and abandoned children. Do you feel this person is capable of providing such an environment to a child? Yes No

Unsure. Please explain answer:

If you have children, would you feel comfortable with this person taking care of your own child if you were unable to do so?

Yes No.

Additional comments: _____

Reference Signature: _____ 5 _____ Date _____

(St. Jude’s Representative can sign if information received over telephone)

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Last First Middle

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Yes No.

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Yes No.

Additional comments: _____

Reference Signature: _____ 7 _____ Date _____

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Yes No.

Additional comments: _____

Reference Signature: _____ 8 _____ Date _____

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Yes No.

Additional comments: _____

Reference Signature: _____ 9 _____ Date _____

(St. Jude’s Representative can sign if information received over telephone)



St. Jude's Ranch for Children, Inc. Non-Disclosure of Proprietary Information

In consideration of my being a volunteer at St. Jude's Ranch for Children, Inc., the undersigned hereby agrees and acknowledges the following:

1. That during my volunteer service there may be disclosed to me certain proprietary information consisting of:
 - a. Confidential information regarding children currently, previously or potentially in the care of St. Jude's Ranch for Children.
 - b. Confidential information regarding employees currently, previously or potentially employed by St. Jude's Ranch for Children.
 - c. Confidential information regarding donors currently, previously or potentially in a philanthropic relationship with St. Jude's Ranch for Children.

2. I agree that during and after the termination of my volunteer service, I shall not use for myself or others, or disclose or divulge to others any confidential information, or any other proprietary information regarding St. Jude's Ranch for Children, Inc., in violation of this agreement.

3. Upon terminating my volunteer service with St. Jude's Ranch for Children, Inc.:
 - a. I shall return to St. Jude's Ranch for Children all documents, property and copies thereof pertaining to St. Jude's Ranch for Children.
 - b. This agreement shall be binding upon me and my personal representatives and successors in interest, and shall inure to the benefit of St. Jude's Ranch for Children, its successors and assigns.
 - c. The enforceability of any one provision to this agreement shall not impair or affect any other terms of this agreement.
 - d. In the event of any breach of this agreement, St. Jude's Ranch for Children, Inc. shall have full rights to injunctive relief, in addition to any other existing rights, without requirement of posting bond, if permitted by law.

Volunteer

Date

St. Jude's Ranch for Children, Inc.

Date



ST. JUDE'S RANCH FOR CHILDREN

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Volunteer Waiver Statement

Name: _____

Company: _____

Mailing Address: _____

Phone Number: _____

Email Address: _____

Waiver of Liability: I agree that I will receive no monetary compensation for any time or labor while participating in a St. Jude's Ranch for Children, Inc. project or program. I will make no unauthorized purchases on behalf of St. Jude's Ranch for Children, Inc. and will present valid sales slips or invoices for payment of all authorized purchases. I will, as directed, use the St. Jude's Ranch for Children, Inc. tax exempt letter for all authorized purchases.

Nevada: I will not have any direct contact with the children of St. Jude's Ranch for Children unless with licensed Youth Care personnel present, per State of Nevada regulation

Texas: I will not have unsupervised direct contact with the children of St. Jude's Ranch for Children unless with a Direct Child Care Worker, per State of Texas regulation

I hereby RELEASE AND HOLD HARMLESS, St. Jude's Ranch for Children, Inc. its agents, employees, members, staff, corporate or other St. Jude's Ranch for Children, Inc. officers and representatives, for whom volunteers work or are involved with, from any injuries sustained by myself or my family, or any damage to my property while traveling to or from activities or meetings, or while on site at the activities.

Consent for Treatment: In case of accident or serious illness, I hereby agree to the performance of such treatment as deemed necessary in the opinion of the attending physician, for absolute emergency only if spouse or responsible party is not present.

I have read and understand the above statements of WAIVER OF LIABILITY CLAUSE AND CONSENT FOR TREATMENT, and AGREE to abide by the stipulation set out hereon, and endorse each of them.

Signed: _____ Date: _____

Special Limitations/Medications: _____

Emergency Contact (name): _____

(phone): _____



ST. JUDE'S RANCH FOR CHILDREN

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Personal Affidavit

I, _____, do hereby certify that I have not been charged or convicted of a felonious crime. In addition, I also state that I have not been convicted of misdemeanor criminal activity. As of the date on this form, I have no pending criminal charges and am not being investigated in regard to such charges.

With my signature I assure the above statement to be true to the best of my knowledge. I understand that failure to report previous criminal activity to St. Jude's Ranch for Children may result in termination of my volunteer abilities and/or legal action.

Dated this _____ Day of _____ 20____
Day Month Year

Signature: _____



ST. JUDE'S RANCH FOR CHILDREN

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Background Investigation/Record Request Authorization

Name _____
Last First Middle

Other Names Used (Maiden, etc.) _____

Social Security Number _____ - _____ - _____ Sex _____ Date of Birth ____/____/____

Driver's License Number _____ State Issued _____

[Note: Sex, Race, and Age are not criteria in any employment/volunteer decision. It is used for identification purposes only]

Current address _____ City/State/Zip _____ County _____ Dates (from – to) _____

Previous address _____ City/State/Zip _____ County _____ Dates (from – to) _____

Previous address _____ City/State/Zip _____ County _____ Dates (from – to) _____

Previous address _____ City/State/Zip _____ County _____ Dates (from – to) _____

LIST ALL CRIMINAL CONVICTIONS AND TRAFFIC OFFENSES.

YEAR	OFFENSE	CITY	COUNTY	STATE

St. Judes Ranch for Children will not knowingly employ or retain any person who has been criminally convicted of one or more of the following offenses, including, but not limited to:

murder, homicide, manslaughter, or concealment of a homicidal death; kidnapping, child abduction, criminal child enticement, or contributing to the delinquency of a minor; unlawful restraint or forcible detention; felonious or aggravated assault, menacing, battery, or infliction of great bodily harm; sexual assault/battery or sexual abuse; unlawful sexual behavior; abuse or criminal neglect of a child; theft, financial exploitation, robbery, or burglary; criminal trespass; arson; unlawful possession or use of weapons or aggravated discharge of a firearm; manufacture, delivery, or trafficking of controlled substances; felony conviction of possession of controlled substance(s); DUI/DWI. Continued employment by St. Jude's Ranch for Children is conditioned upon a finding of no criminal convictions of these offenses unless mitigating circumstances (if any), which will be taken into consideration.

I authorize the release to St. Jude's Ranch for Children (and/or any of its licensed agents) any information held by any parties regarding my previous employment, criminal history record and/or record of convictions in state and local files for violations of any federal, state, local statutes or ordinances, any violations of state or federal regulation protecting children, military records, credit history, driving records and scholastic records and hereby release said persons, schools, companies, government agencies, court and law enforcement authorities from any damage whatsoever for releasing this information. I further authorize St. Jude's Ranch for Children to utilize any of the information I have listed above, including my name, address, social security number and driver's license number to obtain any information referenced in this paragraph.

I certify that all the information I have provided on this authorization is true and accurate. I understand that misstatements, omissions or false or misleading statements which I have provided on any application, authorization, on my resume' and/or in interviews shall constitute grounds for refusal to hire or immediate discharge from employment. In consideration of employment with St. Jude's Ranch for Children, I agree to comply with the Code of Conduct, policies, procedures and requirements of St. Jude's Ranch for Children. I understand this application and/or any St. Jude's Ranch for Children policy, manual, handbook or other written document describing such items do not constitute a written contract at this time or in the future. I understand my employment would be at-will and that my employment could be terminated at any time by either party, with or without cause and with or without notice. Any modification of the at-will employment relationship can only be accomplished by a written document signed by St. Jude's Ranch for Children's Chairman or CEO.

I have read and understand the above.

Signature: _____ Date _____



ST. JUDE'S RANCH FOR CHILDREN

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Fingerprinting Authorization

I, _____, do hereby authorize St. Jude's Ranch for Children, Inc. and the State of Nevada to perform a fingerprint analysis. Further, I authorize for my fingerprints to be stored in a statewide or national database for future review.

I understand that failure to adhere to said fingerprinting may result in denial of my volunteer application for St. Jude's Ranch for Children.

Dated this _____ Day of _____ 20____
Day Month Year

Signature: _____

NEVADA APPLICANTS ONLY



ST. JUDE'S RANCH FOR CHILDREN

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Photo & Name Release

I, _____, do hereby authorize St. Jude's Ranch for Children, Inc. to use my picture and name in newsletters, brochures, and publications depicting activities at St. Jude's Ranch for Children, Inc.

I understand that any use of my picture or name will be done in such a way that they will not cause embarrassment or harm to me.

Dated this _____ Day of _____ 20____
Day Month Year

Signature: _____



ST. JUDE'S RANCH FOR CHILDREN

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Volunteer Timeline

Please reference this timeline as you proceed through the pre-volunteer process*

- Weeks 1 Return completed application and schedule fingerprinting with Volunteer Supervisor
- Week 2-4 Complete initial volunteer training while awaiting results of background checks
- Week 5 Begin regularly scheduled volunteer activities

*Please note that this is a general timeline. The campus and/or position you are applying for may allow for a shorter pre-volunteer wait time. Contact the Community Relations Coordinator at your desired location to answer specific questions about the pre-volunteer process and/or timeline.

Erika Curtis
Community Relations Coordinator—Texas
Bulverde Campus Emergency Children's Shelter
(830) 885-7494 (830) 629-0659
1400 Ridge Creek Lane P.O. Box 311682
Bulverde, Texas 78163 New Braunfels, Texas 78131

Brittney Sandler
Community Relations Coordinator—Nevada
Boulder City Campus
(702) 294-7100
100 Saint Jude Street
PO Box 60100
Boulder City, Nevada 89005





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Fingerprint Authorization

** TO BE COMPLETED AT TIME OF INITIAL INTERVIEW*

Date: _____

To Whom It May Concern:

Please accept this letter as authorization for the following person to be fingerprinted for St. Jude's Ranch for Children.

Name of Staff: _____

Type of Staff: (Volunteer) (Employee)

Reason for fingerprinting: NRS-424.033 Foster Care

Please forward any invoices for expense to St. Jude's Ranch for Children. Should you have any questions, please contact our agency at (702) 294-7100.

Thank you.

Print name of Authorized Person: _____

Signature of Authorized Person: _____

Position Title: _____





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Fingerprinting Location and Instructions

FINGERPRINTING ADDRESS AND CONTACT PERSON

Department of Family Services
701 K North Pecos Rd. (Bonanza Rd and Pecos Rd).
Las Vegas, NV 89101
Attention: Shannon
Phone: (702) 455-5146

DRIVING DIRECTIONS (From St. Jude's Ranch for Children Campus)

1. From the Boulder City Campus, make a left onto US-93 (Buchanan Blvd).
2. At the signal light, make a left onto US-95 N.
3. Continue going North on US-95 N.
4. Take the Charleston Blvd exit. (Exit 72).
5. Turn left onto Charleston Blvd, heading west.
6. Turn right onto Pecos Rd, heading north.
7. Continue straight through Bonanza Rd. On the corner of Bonanza Rd. and Pecos Rd. is Clark County Family Services/Juvenile courthouse.
8. At the end of the building is a roadway connected to the parking lot. Turn left onto the roadway/parking lot.
9. Continue straight to the back of the building until you reach Clark County Family SVC, Child Haven at 701K.
10. Inside, inform the Receptionist that you are there for Fingerprinting. Have your voucher ready to present. Receptionist can instruct you from there.



Date Submitted: _____
Date Approved: _____
Date Denied: _____

DIVISION OF CHILD AND FAMILY SERVICES

APPLICATION FOR NON-PRIMARY FOSTER CARE

(Includes: Baby Sitters, Respite, In-home Assistants or Adults 18 years or older with supervisory authority over children on a temporary or regular basis.)

APPLICANT WILL PROVIDE SERVICES TO: _____

Licensed Foster Home

Last Name: _____ First: _____ Alias: _____

Address (physical): _____ Telephone: _____

Address (mailing): _____ Telephone: _____

SSN: _____ DOB: _____ Place of Birth: _____

Highest Grade Completed in School: _____

RESIDENCE:

List the addresses where you have resided the last five years. Include the name of the county.

Street	City	State/Zip	County	Dates
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

REFERENCES: (Individual adult applying as staff, providing care or moving into household.)

Name	Relationship	Complete Mailing Address
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____
5. _____	_____	_____
6. _____	_____	_____
7. _____	_____	_____

EMPLOYMENT:

Employed by: _____ Phone: _____ Type of work: _____

Hours of work: _____ Length of time on present job: _____

TRANSPORTATION:

Non-primary staff may be responsible for providing transportation to counseling, medical appointments, visits with natural parents etc. Will you transport? Yes No

If No, Explain _____

Auto Insurance: Yes No

Please attach a copy of your Drivers License and DMV record if providing transportation.

Vehicles:

_____ Seat Belts: Yes No Car Seats: Yes No

Year Make Registration Dates

Seat Belts: Yes No

Car Seats: Yes No

Year Make Registration Dates

Other Transportation Available: _____

BACKGROUND INFORMATION:

I. Have you ever been licensed as a foster home in Nevada or in another State or worked in a Foster/Group Home?

Yes No If Yes, when, where and how long? _____

II. Do you now or have you ever provided care for any child that is not your own? Yes No

If yes, for whom, when, where, & how long? _____

III. Do you now or have you ever had a Child Day Care License? Yes No

If yes, please list the state(s) and when you possessed the license(s). If you have a current child care license, please attach copy of the license. _____

IV. Give a brief statement as to your reasons for wanting to work with foster children: _____

V. List your special qualities, talents, hobbies, additional language spoken, etc.: _____

VI. Describe your general health (include any serious illnesses or disabilities): _____

a) Do you have any history of mental illness, drug or alcohol addiction? Yes No

If yes, explain: _____

VII. Are you or have you ever been on any medications? Yes No If yes, table below must be completed. Please exclude medications prescribed to treat common childhood illness such as flu, ear, infections, etc.

MEDICATION	DOSAGE	PRESCRIBED BY	DATE STARTED & DISCONTINUED

VIII. Have you ever been arrested? Yes No

If yes, please explain: _____

Date fingerprints submitted: _____

Section 106 of the Federal Adoption and Safe Families Act states that:

- In any case in which a record check reveals a felony conviction for child abuse or neglect, for spousal abuse, for a crime against children (including child pornography), or for a crime involving violence, including rape, sexual assault, or homicide, but not including other physical assault or battery, if a State finds that a court of competent jurisdiction has determined that the felony was committed at any time, such final approval shall not be granted; and
- In any case in which a record check reveals a felony conviction for physical assault, battery, or a drug-related offense, if a State finds that a court of competent jurisdiction has determined that the felony was committed within the past 5 years, such final approval shall not be granted.

IX. Have you or anyone in your household ever been investigated for child abuse/neglect?

Yes No If yes, list name, date, investigating agency where incident occurred, allegations and outcome of case: _____

I attest that the above information is complete and true to the best of my knowledge. Failure to disclose or answer the questions truthfully may result in an immediate denial of this application.

 Signature

 Date

KENNY GUNN
Assistant Director
6171 W Charleston Boulevard, Building 15
Las Vegas, Nevada 89146
(702) 486-6100
FAX (702) 486-7742

Child & Family Neighborhood Care Services
2810 W Charleston Boulevard, Suite G-67
Las Vegas, Nevada 89102
(702) 486-0085
FAX (702) 486-0088

Early Childhood Services
6171 W Charleston Boulevard
Las Vegas, Nevada 89146
(702) 486-6100
(702) 486-8029

Desert Willow Treatment Center
6171 W Charleston Boulevard
Las Vegas, Nevada 89146
(702) 486-6100
FAX (702) 486-6307

Foster Care and Adoptions
610 Bedford Street
Las Vegas, Nevada 89107
(702) 486-7800
Fax (702) 486-7885

CLARK COUNTY



DEPARTMENT OF FAMILY SERVICES

**AUTHORIZATION FOR
RELEASE OF INFORMATION**

Michael Willden
Director

East Neighborhood Care Center
307 E. Washington Street, Suite 1C
Las Vegas, Nevada 89101
(702) 486-7500
FAX (702) 486-7522

South Neighborhood Care Center
145 Panama St.
Henderson, Nevada 89015
(702) 486-6770
FAX (702) 486-6750

West Neighborhood Care Center
6171 W Charleston Boulevard, B
Las Vegas, Nevada 89146
(702) 486-6100
FAX (702) 486-7759

North Neighborhood Care Center
4538 W Craig, Ste. 299
North Las Vegas, Nevada 89032
(702) 486-5410
FAX (702) 486-5630

Central Neighborhood Care Center
2424 North Martin Luther King Bl.
Bldg. C
North Las Vegas, Nevada 89032
(702) 486-5001
FAX (702) 486-5029

Regarding:

Name

Social Security Number

Name

Social Security Number

You are authorized by the undersigned to release to the Department of Family Services, the information including, but not limited to, that indicated below. This authorization constitutes a full and complete release from any liability resulting from disclosure of such information. This authorization also permits release of medical information under the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255) and Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act amendments of 1974 (P.L. 93-282). A photocopy of this form shall be as valid as the original.

Data Requested:

Signature

Date

Signature

Date

Please return this request to: **Department of Family Services**



**DEPARTMENT OF FAMILY SERVICES
Foster Care Licensing**

333 N Rancho Suite 130 • Las Vegas NV 89106
(702) 455-7400 • Fax (702) 471-6770

FOSTER PARENT ARREST AND CONVICTION DECLARATION

1. Please check the appropriate box and sign below.
2. Please return this form to your licensing worker with your renewal application.

	I/we have not been arrested for or convicted of a criminal offense since our initial Foster care license was issued, or our previous license renewal, whichever applies.
	I/we have been arrested for or convicted of a criminal offense since our initial Foster care license was issued, or our previous license renewal, whichever applies. AN EXPLANATION AND A COPY OF THE ARREST OR CONVICTION RECORD ARE ATTACHED.

I/we understand that this declaration is considered to be part of our foster license renewal application and will be retained in our foster license record. We also understand that falsifying or not disclosing this information may result in the revocation of our foster care license under NAC 424.110.3 and NAC 424.195.

Signed,

Foster Parent

Date

Foster Parent
Other Adult Household Member(s) (if applicable)

Date

Signature

Date

Signature

Date

Clark County Division of Family Services
Foster Care Licensing
701 North Pecos
Las Vegas, Nevada 89101

Child Support Information
It is mandatory that you answer this question.

Please check appropriate answer.

_____ **I am not subject to a court order** for the support of a child

_____ **I am subject to a court order** for the support of one or more children and am in compliance with the order or an in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

_____ I am subject to a court order for the support of one or more children and am **not** in compliance with the order or a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount owed pursuant to the order.

Please provide the State, County and City where the Court order is issued:

Monthly Payment amount: \$ _____

Signature

Date

Signature

Date

CLARK COUNTY DEPARTMENT OF FAMILY SERVICES

FOSTER CARE LICENSING APPLICATION ADDENDUM

Please answer the following question:

Do you provide regular paid care for others at this time?
(Please include licensed day care and any unlicensed care for others, for whom you are receiving pay, including the elderly, disabled or any other persons) If so, please explain and provide a copy of your license as applicable.

Signed: _____ Date: _____

Signed: _____ Date: _____

We understand that foster parents may not provide paid care for others, even if another licensing authority does not have a restriction against it. This is to protect the safety of all members of the household and placed children. If provision of such care is verified after a foster care license has been issued, and no administrative waiver has been approved, the foster care license can be revoked.



ST. JUDE'S RANCH FOR CHILDREN

with help comes hope

Volunteer Policies and Procedures Statement

I. Volunteer Commitment

St. Jude's Ranch for Children is committed to maintaining a relationship with volunteers that promotes dignity and involvement. We are dedicated to treating volunteers fairly, providing good and safe working conditions, and above all, delivering the respect that each volunteer deserves.

This statement is designed to give protections to volunteers, to inform them of their rights and responsibilities. The purpose is to ensure that St. Jude's Ranch accomplishes its commitment to improve the lives of the children in our care.

II. Management Rights

St. Jude's Ranch has the exclusive right to exercise the customary functions of management which include, but are not limited to:

- A. Manage and control the premises and equipment
- B. Select, hire, promote, administer corrective action, suspend, dismiss, assign and supervise volunteers
- C. Determine and change starting times, quitting times and shifts, and days of work
- D. Transfer volunteers within departments, to other departments/location
- E. Determine the size, composition and qualifications of volunteers
- F. Establish, change and abolish policies, practices, rules and regulations
- G. Change methods of operation and assign duties to volunteers as necessary to provide adequate services

III. Code of Conduct

St. Jude's Ranch for Children maintains that certain rules and regulations regarding volunteer behavior are necessary for the efficient operation of the Organization and for the benefit and safety of all volunteers, employees and the children we serve. Conduct that interferes with operations, discredits the Organization, or is offensive, is not acceptable.

The list of violations below represents actions which are violations of our agency policies and are subject to corrective actions up to and including immediate termination:

- A. Any act of abuse, neglect, disrespect or exploitation towards the children we serve
- B. Any acts of a sexual nature towards the children we serve of any age (0-21)

- C. Fighting with, abusive, disrespectful or threatening conduct or speech toward the children we serve, co-volunteers, staff and/or visitors
- D. Failure to immediately report cases of actual or suspected abuse/neglect or any incident of a reportable nature to a supervisor or other management person.
- E. Theft, unauthorized removal, wrongful possession, or deliberate destruction of property, merchandise, equipment or possessions belonging to the children we serve, co-volunteers, staff, or to St. Jude's Ranch for Children.
- F. Misappropriation of donated (In-Kind) items or donated monies to St. Jude's Ranch for Children
- G. Unlawful manufacture, distribution, dispensation, possession, sale, purchase, or use of illegal drugs, controlled substances, or alcohol while volunteering or on Organization owned, leased or controlled property or while operating Organization owned, leased or controlled equipment or vehicles
- H. Intentional or flagrant insubordination or refusal to follow work instructions
- I. Possession or use of a firearm or any other prohibited weapon of any kind while on Organization owned, leased or controlled property or while operating Organization owned, leased or controlled equipment or vehicles
- J. Unreported absence of at least two scheduled volunteer days
- K. Disclosure of confidential information to unauthorized persons.
- L. Dissemination of false or malicious information about the Organization, volunteers, staff or the children we serve
- M. Substantial acts of harassment including such conduct as slurs, jokes, intimidation, or other verbal or physical attacks upon a person because of their race, color, religion, sex, sexual orientation, national origin, age, disability, or veteran status
- N. Inefficiency, incompetence, or negligence in the performance of duties
- O. Prohibited from working with children by the Department of Family Services
- P. Abusive or negligent use of tools or equipment
- Q. Failure to dress properly so as to reflect a conservative style while still functional for every day work operations
- R. Careless or blatant waste of materials
- S. Posting unauthorized notices
- T. Administering over the counter or prescription medication to the children we serve

It is impossible to compile a listing of all violations subject to corrective action. The examples above illustrate the type of behavior that will not be permitted, but are not intended as an all inclusive listing.

IV. Property Access

It is St. Jude's Ranch for Children's policy to limit access to its Organization-owned, leased or controlled properties to the individuals we serve, employees, vendors and invited guests. All vehicles and persons are subject to being searched to ensure the safety and security of all locations.

- A. Upon separation, former volunteers are not allowed on St. Jude's Ranch property, unless prior approval is given by the CEO.
- B. St. Jude's Ranch may at any time request volunteers to wear an identification badge while on St. Jude's Ranch property or while conducting St. Jude's Ranch business off site.

Volunteer Acknowledgement Statement

I acknowledge that I have received, reviewed and understand the contents of the Volunteer Application which consist of the following sections: (Please initial all)

- Letter from the organization
- Mission, Vision, Core Values, Strategy Statement
- Personal Contact Information Sheet
- Work History Form
- Personal Reference Section
- Non-Disclosure Statement
- Volunteer Waiver Statement
- Personal Affidavit
- Background Investigation/Record Request Authorization
- Fingerprinting Authorization
- Fingerprinting Location and Directions
- Photo and Name Release
- Volunteer Timeline
- Volunteer Policy and Procedures Statement

I understand that this packet lists general information relating to the Organization. The sections listed as policies reflect actual policies and volunteers are to comply with all the provisions described within. This packet is not an Organizational Policy and Procedure Manual and does not include all policies of the organization.

I understand that as a volunteer at St. Jude's Ranch for Children, I am to conduct myself at all times in a manner that reflects the Organization's Mission, Vision, Core Values and strategy.

I understand that this Volunteer Packet, or any other St. Jude's Ranch for Children's policy, practice or procedure, does not constitute a contract. I further understand that the information contained is subject to change and revisions without notice. Any written or oral statement by a supervisor or staff member that is contrary in this Volunteer Packet should not be relied upon.

I understand that I have read and will comply with the information in this Volunteer Packet. I am bound by the provisions contained herein, and that my continued volunteer engagement is contingent on following them.

Volunteer Name (Print)

Date

Volunteer Signature