

WHY VOLUNTEER AT CHAMBLISS?



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24•7•365

GET INVOLVED - VOLUNTEER! - Thank you for your interest in becoming a volunteer! Volunteers are our biggest asset and we would not be where we are today without the help of so many incredible volunteers. Anyone interested in helping us better serve the community's children is welcome! Thank you for donating your time and talents to making our organization a wonderful place for children to grow and learn.

OUR MISSION - Our mission is to preserve family unity and help prevent the dependency, neglect, abuse, and delinquency of children by responding to the community's child care needs.

OUR HISTORY - The history of Chambliss Center for Children can be traced all the way back to 1872, when a group of concerned women began to rescue orphaned children. Their efforts were known as the Women's Christian Association and in 1913, as the organization grew, a larger facility was built on Vine Street and they adopted a new name: *The Vine Street Orphans' Home*. In 1939, the program moved into its present facility on Gillespie Road. In 1955, the name was changed to Children's Home and in 1969, as a way to meet the community's changing child care needs, the Extended Child Care Program was created.

In 1983, the Children's Home contracted with Hamilton County government to take over the Chambliss Shelter in order to care for children in the custody of the State of Tennessee. At that time the agency became known as the Children's Home/Chambliss Shelter and in 1986 began to collaborate with off-site agencies. In 2002, Children's Home/Chambliss Shelter began to provide child care inside of several Hamilton County Schools. This provided an added benefit of on-site child care for teachers.

In 2013, following program expansion and in a quest for name simplification, the agency became known as Chambliss Center for Children (CCC). Today, the Chambliss network of agencies (Gillespie Road campus, off-site centers, and school-based programs) provide care to more than 700 children every day!

EXTENDED CHILD CARE PROGRAM - The child care program provides early education and care primarily for low-income, single parent families. We are open 24/7/365, serving children from six weeks through twelve years old. Fees are based on each family's income. We have over three hundred children enrolled and provide them with three full meals and one snack daily. We rely heavily on our volunteers to assist our teachers, to organize special events for the children, or to lend a hand to our maintenance department.

IN KIND DONATIONS - In kind donations help to fill needs in our child care program and our residential programs. Our Residential Programs consist of our foster programs and our transitional living program.



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24•7•365

VOLUNTEER APPLICATION

--

Date:

APPLICANT INFORMATION

Name:

Address:

Home Phone:

Cell Phone:

Email:

Social Security Number:

Date of Birth:

Age:

Organization representing (if applicable):

Are you a citizen of the United States?

Yes

No

If no, are you authorized to work in the U.S.?

Do you have a mental or physical problem, which affects your work?

Yes

No

If yes, please explain:

Have you ever been convicted of a criminal offense (felony or misdemeanor)?

Yes

No

If yes, please explain:

EXPERIENCE

What experience do you have with children?

Relevant volunteer interests/skills:

AVAILABILITY

How much time do you wish to volunteer each week or month?

What day(s) are you available to volunteer? Please circle all that apply.

Monday

Tuesday

Wednesday

Thursday

Friday



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24•7•365

VOLUNTEER APPLICATION

AVAILABILITY

What hours are you available to volunteer?

EDUCATIONAL BACKGROUND

Middle School/High School: Circle highest grade completed: 6 7 8 9 10 11 12 GED

School Name:

School Street Address:

School City, State, Zip Code:

Did you graduate:

Yes

No

If yes, give graduation date:

Degree/diploma earned:

College/University: Circle highest grade completed: 1 2 3 4 5 6

School Name:

School Street Address:

School City, State, Zip Code:

Did you graduate:

Yes

No

Degree earned:

Major:

EMPLOYMENT EXPERIENCE

Name of Employer:

Address:

Phone Number:

Employment Dates:

Job Title:

Job Responsibilities:

Supervisor:

May we contact your supervisor for a reference?

Yes

No

EMERGENCY CONTACT INFORMATION

Name:

Address:

Work Number:

Home/Cell Number:

Name:

Address:

Work Number:

Home/Cell Number:



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24•7•365

VOLUNTEER APPLICATION

REFERENCES

Please list three references. Your references must be at least 25 years of age, need to have known you for at least 1 year, and cannot be a family member.

Name	Relationship
Email:	Phone Number:
Name	Relationship
Email:	Phone Number:
Name	Relationship
Email:	Phone Number:

DEMOGRAPHIC INFORMATION (OPTIONAL)

You may optionally provide the following information. It is used only to help us get a better idea of the demographic make-up of our Volunteers

Race:	Sex:
-------	------

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge.

I understand that a Criminal Background Check is required for all volunteer applicants 18 years of age or above.

If this application leads to a volunteer assignment, I understand that any false or misleading information in my application or interview may result in my release from Chambliss Center for Children's Volunteer Program.

Signature:	Date:
------------	-------

Please return your volunteer application to the attention of:
Dana Jones, Director of Volunteer Services
dcjones@chamblisscenter.org
Direct 423.468.1126 | Main 423.698.2456 | Fax 423.622.6549
315 Gillespie Road | Chattanooga, TN 37411



CHAMBLISS CENTER FOR CHILDREN

GROWING YOUNG LIVES 24•7•365

POLICIES AND PROCEDURES

The Director of Volunteer Services is the staff person responsible for the supervision of volunteers. The following policies and procedures apply to all volunteers of Chambliss Center for Children. Volunteers are expected to follow the policies of the organization especially with regard to confidentiality and respectful behavior toward persons served and staff. Dismissal of a volunteer will be effective immediately upon notification by the Director of Volunteer Services.

1. Timesheets must be signed for each day the volunteer works.
2. The volunteer must notify the Director of Volunteer Services if unable to work on his/her assigned day(s). In the event of two consecutive instances of the volunteer's failure to notify the Director of Volunteer Services, it shall be assumed that the volunteer is no longer interested in his/her volunteer assignment. Prior to returning to the volunteer assignment, the volunteer must be in contact with the Director of Volunteer Services.
3. Involvement with the children must be restricted to those activities specified in the job description. Volunteers are not to become involved in contact with family members and/or in any relationship surrounding the child's placement at Chambliss Center for Children.
4. All information concerning the children, families, and staff gained at the Center is considered confidential and is not to be divulged to anyone outside Chambliss Center for Children.
5. Volunteers are not to bring food for the children without prior approval of the supervisor.
6. Volunteers are not to eat in front of the children unless it is a meal which the children are also being served.
7. Volunteers are invited to eat those meals served to staff at the time such meals are served.
8. Any accident or illness incurred while on duty should be reported immediately to the supervisor.
9. No medication or any type of medical treatment is to be administered to any child by the volunteer.
10. No photographs are to be taken of any children, except with prior permission from the Director of Volunteer Services or Director of Communications.
11. Spanking, slapping, or inflicting any physical punishment on the children is not allowed. Discipline may never be related to rest, food or toileting.
12. Smoking in front of children or drinking alcoholic beverages or drugs of any kind in the Center is not allowed. No volunteer is to report for duty while under the influence of alcohol or drugs.
13. The only language that is to be used is that appropriate for young children. No abusive or foul language is permitted.
14. Chambliss Center for Children staff will make final decisions when questions arise in relation to the children.
15. When responsible for the supervision of a child, the volunteer must never leave the child unattended.
16. Wearing improper clothing such as short shorts, halters, or anything revealing is not permitted.
17. Volunteers must not teach or promote in any way religious doctrine to the children.



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24•7•365

POLICIES AND PROCEDURES

18. Discrimination against any child for any reason will not be permitted.
19. Any time spent at Chambliss Center for Children, other than regularly scheduled hours, must be approved in advance by the Director of Volunteer Services.
20. Volunteers may be dismissed on the basis of:
 - A. Failure to contain their activities within the scope of their personal duties.
 - B. Failure to maintain a proper working relationship with persons served or staff.
 - C. Unwillingness to carry out their assigned volunteer activities.
 - D. When the Director of Volunteer Services determines that the volunteer's service is not in the best interest of the organization.
 - E. Unauthorized use of the agency's materials, supplies, facilities, or equipment.
 - F. Receipt of an "indicated" report of child abuse, neglect, or exploitation.

VOLUNTEER SIGNATURE

I have read, understand, and agree to abide by all Policies and Procedures as well as practices of Chambliss Center for Children.

Volunteer's Signature

Date



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24•7•365

STATEMENT OF CONFIDENTIALITY

All information regarding past, present and future clients of Chambliss Center for Children and/or their relatives and/or other relations is considered to be confidential.

At no time is information regarding clients and/or relatives and/or other relations to be released to any person without prior written consent of the client, or, in the event of a minor child, his parent or legal guardian.

We ask that you, as a volunteer, agree to the following:

1. Protect the identity of clients in all circumstances, including never posting videos or photographs on social media.
2. Never discuss clients or their circumstances with anyone outside the agency.
3. Never discuss one client with another.
4. Never discuss clients or their circumstances in public places.
5. If your job requires documentation of client contacts:
 - a. Inform the client that you maintain records of your contacts.
 - b. Record information factually, identify impressions or opinions as such.
 - c. Sign your name and date to each entry.

VOLUNTEER SIGNATURE

I agree to the above Statement of Confidentiality and pledge my commitment to the confidentiality of all client information.

Volunteer's Signature

Date



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24 • 7 • 365

VOLUNTEER WAIVER

Thank you for volunteering with Chambliss Center for Children. Please read, complete, and sign the following form to participate in volunteer activities.

VOLUNTEER INFORMATION (PLEASE PRINT CLEARLY)

Name: _____

Address: _____

Email: _____

Phone: _____ Age: _____

EMERGENCY CONTACT INFORMATION

Name: _____

Relationship to Volunteer: _____ Phone: _____

VOLUNTEER AGREEMENT

As a volunteer, I release and hold harmless Chambliss Center for Children from any and all claims, costs, suits, actions, judgments or expenses upon any damage, loss or injury to me or to my property which may arise from volunteer activities.

I acknowledge that I am fully aware of any and all risks posed by these volunteer activities and that I have no medical condition that prevents me from engaging in them.

I also give permission to be photographed by Chambliss Center for Children or the media for use in printed materials, through the internet or through other media outlets.

In signing below, I acknowledge that I have read and understand this volunteer agreement.

Signature: _____ Date: _____

NOTE: If the volunteer is under the age of 18, a parent or legal guardian must sign.

Parent Signature: _____ Date: _____



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24•7•365

VOLUNTEER STATEMENT OF REFERENCE

Name of Volunteer: _____ Date: _____

Name of Volunteer Reference: _____

Relationship to the Volunteer applicant: _____

Length of time you have known the Volunteer applicant: _____

Directions: Please ask the Volunteer Reference to rate the Volunteer applicant on the following scale. When rating the Volunteer applicant, please keep in mind that our Volunteers may work with children from newborns to twelve years of age. Any additional comments the Volunteer Reference would like to make will be appreciated and remain confidential. Each Volunteer must have three (3) References completed and on file prior to beginning an assignment. How would you describe his/her personal characteristics?

	Excellent	Good	Fair	Poor
Promptness and regularity in keeping appointments				
Physical/Mental health regarding person's ability to be actively involved with young children				
Compassionate, patient, and warm attitude in working with children				
Ability to take initiative				
Ability to follow directions				
Communication skills				
Professional appearance				
Ability to use good judgement in an emergency				
Flexibility and adaptability				

How would you say he/she relates with children?

Additional Comments:

Signature: _____

Date: _____



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24•7•365

VOLUNTEER STATEMENT OF REFERENCE

Name of Volunteer: _____ Date: _____
Name of Volunteer Reference: _____
Relationship to the Volunteer applicant: _____
Length of time you have known the Volunteer applicant: _____

Directions: Please ask the Volunteer Reference to rate the Volunteer applicant on the following scale. When rating the Volunteer applicant, please keep in mind that our Volunteers may work with children from newborns to twelve years of age. Any additional comments the Volunteer Reference would like to make will be appreciated and remain confidential. Each Volunteer must have three (3) References completed and on file prior to beginning an assignment. How would you describe his/her personal characteristics?

	Excellent	Good	Fair	Poor
Promptness and regularity in keeping appointments				
Physical/Mental health regarding person's ability to be actively involved with young children				
Compassionate, patient, and warm attitude in working with children				
Ability to take initiative				
Ability to follow directions				
Communication skills				
Professional appearance				
Ability to use good judgement in an emergency				
Flexibility and adaptability				

How would you say he/she relates with children?

Additional Comments:

Signature: _____

Date: _____



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24•7•365

VOLUNTEER STATEMENT OF REFERENCE

Name of Volunteer: _____ Date: _____
Name of Volunteer Reference: _____
Relationship to the Volunteer applicant: _____
Length of time you have known the Volunteer applicant: _____

Directions: Please ask the Volunteer Reference to rate the Volunteer applicant on the following scale. When rating the Volunteer applicant, please keep in mind that our Volunteers may work with children from newborns to twelve years of age. Any additional comments the Volunteer Reference would like to make will be appreciated and remain confidential. Each Volunteer must have three (3) References completed and on file prior to beginning an assignment.

How would you describe his/her personal characteristics?

	Excellent	Good	Fair	Poor
Promptness and regularity in keeping appointments				
Physical/Mental health regarding person's ability to be actively involved with young children				
Compassionate, patient, and warm attitude in working with children				
Ability to take initiative				
Ability to follow directions				
Communication skills				
Professional appearance				
Ability to use good judgement in an emergency				
Flexibility and adaptability				

How would you say he/she relates with children?

Additional Comments:

Signature: _____

Date: _____



CHAMBLISS CENTER FOR CHILDREN
GROWING YOUNG LIVES 24•7•365

VOLUNTEER CHECKLIST

Applicant's Name: _____

_____ Policies and Procedures reviewed and signed

_____ Statement of Confidentiality reviewed and signed

_____ Authorization for Criminal Background Check filled out completely, signed and dated

_____ Volunteer Application filled out completely, signed, and dated

_____ _____ Three (3) Volunteer Statements of Reference, completed, signed and dated

<i>For Chambliss Use Only</i>	Volunteer Accepted
County received: _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
City received: _____	Start Date: _____
TN Felony Search: _____	Initial Assignment: _____
TN Abuse Search: _____	Classroom: _____
TN SOR Search: _____	Days/Times: _____
National SOR Search: _____	
Google/Social Media Search: _____	

