



To all interested volunteers,

Corrigan Care volunteers are thoroughly screened to ensure the highest quality care for our special children. There are two simple steps to start the process to become a qualified Corrigan Care volunteer.

Please fill out this volunteer application and acquire your criminal background check. Once you have both of these, please submit the application with a copy of the criminal background check. Once you have passed this qualification, we will direct you to where you can get your drug test. After you pass the drug test, you are considered a Corrigan Care volunteer and are welcome to sign up to volunteer at any of our service locations or events.

In Cobb County, you can obtain your Criminal Background check at Police Headquarters, 140 North Marietta Pkwy, Marietta, GA 30060. Or, you can go to Marietta Police Department at 240 Lemon Street, Marietta, GA 30060. The cost is \$15, but it's yours to keep. Please make sure that you check that you will be a childcare worker and also for mentally challenged persons. We only need a copy of it. If you go to Smyrna Police Headquarters the price is \$25.

Thank you for your interest in becoming a Corrigan Care, Inc. volunteer. We look forward to working with you and serving these special children!

Sincerely,

Alicia Gandhi

Volunteer Services Director

Corrigan Care, Inc.

(678) 343-7581

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CORRIGAN CARE VOLUNTEER APPLICATION

Name: _____ Age: _____

Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____ Phone: _____

Employer: _____ Job Title: _____

How did you hear about Corrigan Care, Inc.? _____

Please describe your experience with children with disabilities. _____

I am available to volunteer (days and times): _____

I am interested in volunteering in the following areas:

- Mom's Morning Out Respite Nights Special Event Staff
 Administrative Needs Committee Member Internship

Yes, I would like to be contacted via email regarding urgent or last minute volunteer needs.

Have you ever been convicted or charged with a felony? No Yes

If yes, please explain. _____

Please list two professional references (not family) that we may contact.

Name: _____ Phone: _____ Relationship: _____

Name: _____ Phone: _____ Relationship: _____

In case of emergency, please contact:

Name: _____ Phone: _____ Relationship: _____

I, _____ certify that all the information I have provided is true and I have never been charged or convicted with felony offense such as child abuse or neglect, child pornography, child abduction, kidnapping, rape or any other offense. I understand that Corrigan Care, Inc. is not responsible for any injuries or damage to me and/or my personal property that may result from my voluntary involvement in their activities. I hereby discharge Corrigan Care, its directors, agents and other volunteers from all claims, demands and actions from such activities. I grant Corrigan Care permission to use any photographs, video or quotations from me during my involvement with Corrigan Care to be used to further promote Corrigan Care, Inc. Furthermore, I realize that any sensitive family information that I become aware of during my voluntary participation is confidential and should not be discussed outside the bounds of Corrigan Care, Inc. Finally, I understand that I am an 'at will' volunteer and can be terminated at anytime.

Signature: _____ Date: _____