



Dear Prospective Volunteer:

Thank you for your interest in volunteering for Kids in Crisis. We are always grateful for the support of the community and appreciate the time and effort given to us by local volunteers.

Kids in Crisis is still the only agency in the state to provide free, 24-hour crisis intervention, counseling and emergency shelter for children of all ages. We cannot do what we do without caring people like you.

There are essentially three ways to volunteer for Kids in Crisis, all equally important:

- Direct Care - Spending time with the children at our Crisis Nursery or Teen House, both in Greenwich;
- SafeTalk - A school-based child assault prevention program, teaching children they have the rights to be "Safe, Strong and Free" all done through role plays;
- Special Activities - Fundraising, administrative support, facilities maintenance, or a project with the kids.

Please take a moment to review the enclosed material, which provides additional information about volunteer activities and about the agency. If you would like to volunteer, please fill out the application and mail to:

Kids in Crisis  
Volunteer  
One Salem Street  
Cos Cob, CT 06807

Should you have any further questions, please feel free to call me at 203.327.KIDS or email to [jdorman@kidsincrisis.org](mailto:jdorman@kidsincrisis.org).

We look forward to welcoming you to the Kids in Crisis family.

Sincerely,

Jamie Dorman  
Assistant Director of Community Services

**VOLUNTEER APPLICATION  
For  
KIDS IN CRISIS**

**Name:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

\_\_\_\_\_  
**Home Address**

\_\_\_\_\_  
**Business Address**

\_\_\_\_\_  
**City**                      **State**                      **Zip**

\_\_\_\_\_  
**City**                      **State**                      **Zip**

**Home Phone:** \_\_\_\_\_

**Office Phone:** \_\_\_\_\_

**Home Fax:** \_\_\_\_\_

**Office Fax:** \_\_\_\_\_

**E-Mail Address** \_\_\_\_\_

**Previous E-Mail** \_\_\_\_\_

**Previous Employment** \_\_\_\_\_

**Area of Interest:**

**Direct Service:**                      Children (new born to 12)    Adolescents (12 - 17)    SafeTalk

**Administration:**                      Clerical/secretarial    Data processing    Fund raising project

**Special group projects:**                      Parties    Organizing a drive    Gardening    Painting

   Dropping off dinner    Take our residents for a night out

**What is your availability and estimated start date?** \_\_\_\_\_

**How did you hear about Kids in Crisis?**

**What is your educational background?**

**What prior volunteer experiences have you had?** \_\_\_\_\_

What other organizations (civic, religious, school, etc.) are you currently involved with?

\_\_\_\_\_

Role there? \_\_\_\_\_ Length of service? \_\_\_\_\_

List any special training such as First Aid, CPR, Crisis Intervention, Etc.?

\_\_\_\_\_

\_\_\_\_\_

Have you ever been convicted of a crime? If so, on what charge?

\_\_\_\_\_

Please list two references that we may contact on your behalf. Include in what capacity they know you.

Name	_____	Name	_____
Address	_____	Address	_____
Phone	_____	Phone	_____
Relationship	_____	Relationship	_____

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

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**FOR OFFICE USE ONLY**

Date Application Reviewed

\_\_\_\_\_

Date of Phone Contact by Program Director

\_\_\_\_\_

Comments:

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