



**VOLUNTEER APPLICATION**

**Monterey County Rape Crisis Center**

P.O.Box 2630 Monterey, CA 93942  
Office: (831) 373-3955  
Fax: (831) 373-3389  
**Crisis Line: (831) 375-4357**  
**(375-HELP)**

P.O. Box 2401, Salinas, CA 93902  
Office: (831) 771-0411  
Fax: (831) 771-0105  
**Crisis Line: (831) 424-4357**  
**(424-HELP)**

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Birthdate: \_\_\_\_\_ Email Address: \_\_\_\_\_

Current Employment: \_\_\_\_\_

Name

Address

Dates employed (month/year) From \_\_\_\_\_ to \_\_\_\_\_

What are your duties?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If currently employed, may we contact this employer? Yes \_\_\_\_\_ No \_\_\_\_\_

Name of Supervisor \_\_\_\_\_

Additional Work Experience (be brief) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have previous volunteer experience? Yes \_\_\_\_\_ No \_\_\_\_\_ if yes, please describe:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where did you hear of MCRCC?

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Why do you want to volunteer with MCRCC?

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Do you have any specific knowledge regarding sexual assault (i.e. from readings, friends/family, personal experiences, etc.)?

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Are you a survivor of sexual assault or child sexual abuse? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, when did the assault or abuse happen? Did you seek counseling or other support services? \_\_\_\_\_

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Have you ever perpetrated any form of sexual abuse, harassment, or assault? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, describe \_\_\_\_\_

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Have you ever been convicted of a felony? Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of a misdemeanor? Yes \_\_\_\_\_ No \_\_\_\_\_

*(Note: MCRCC is authorized by the California Department of Justice to perform background checks on its volunteers.)*

If yes (to either), please explain: \_\_\_\_\_

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Have you ever been under the care of a doctor for mental illness or on medication for mental illness? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, explain: \_\_\_\_\_

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What qualities, life, educational, and work experience, or other skills do you have that may be helpful in your work as a sexual assault counselor? What do you feel are your strongest assets?

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Can you commit to attend all of the training sessions? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you commit to attend the monthly required advocate meetings, usually on the 1<sup>st</sup> Tuesday of every month from 6:00 – 7:30 pm? Yes \_\_\_\_\_ No \_\_\_\_\_

Can you make a 6-month volunteer commitment to MCRCC? Yes \_\_\_\_\_ No \_\_\_\_\_

Availability: Days \_\_\_\_\_ Nights \_\_\_\_\_ Weekends \_\_\_\_\_ Flexible \_\_\_\_\_

If there are times you are not available, please specify below:

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Do you have your own transportation? Yes \_\_\_\_\_ No \_\_\_\_\_

**Educational Background:**

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**Other languages spoken:** \_\_\_\_\_

**Hobbies and Interests:** \_\_\_\_\_

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**Is there anything else you would like to tell us?** \_\_\_\_\_

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**References: List the name and phone number of 2 personal references.**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I declare under penalty of perjury that I have not been investigated, charged or convicted of any crime, misdemeanor or felony which is related to sexual assault, sexual abuse, domestic abuse, or any felony. I hereby certify that the facts set forth in this application are true and correct to the best of my knowledge and I authorize MCRCC's representatives to verify any/all information.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

*It is the policy of the Monterey County Rape Crisis Center to provide equal employment opportunities to all employees, applicants for employment, and volunteers. All employment practices and services are administered in a manner designed to ensure that employees, applicants for employment or volunteers are not subjected to discrimination on the basis of age, race, color, sex, sexual orientation, national origin, ancestry, medical condition, disability, marital status, religious or political preferences or union affiliation.*

*Please note that MCRCC reserves the right to refuse applicants into its volunteer training. Completion of advocate training does not guarantee certification as a sexual assault victim counselor, nor does it guarantee a volunteer assignment.*