

## **SAFEHOUSE DENVER DEVELOPMENT VOLUNTEER APPLICATION**

Thank you for your interest in episodic volunteer opportunities with SafeHouse Denver's Development Department. Please complete this application and return it at your earliest convenience. Upon receipt of your application you will be contacted to schedule a phone interview.

**Name:**

**Mailing Address, City, State, and Zip:**

**Phone:**

**Fax:**

**Email:**

**Place of employment/occupation:**

**Are you 18 years or older?**  yes  no

**How did you hear about SafeHouse Denver's volunteer programs?**

**Have you applied/plan to apply to our Children's Program/Crisis Line Program?**  yes  no

**Are you currently volunteering in our Children's Program/Crisis Line Program?**  yes  no

**Have you ever been convicted of a crime?**  yes  no

**If yes, please explain:**

**Have you had domestic violence charges filed against you?**  yes  no

**If yes, please explain:**

Have you been court-ordered to obtain perpetrator treatment?  yes  no

If yes, please explain:

Have you had a protection order filed against you?  yes  no

If yes, please explain:

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### CONFIDENTIALITY OATH

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**As a volunteer of SafeHouse Denver, I pledge to respect all matters of confidentiality. I will not divulge the address or the location of SafeHouse, except as absolutely necessary. I will not release the identity of any woman and child participating in SafeHouse Denver's services. I will not discuss client cases or information with persons other than SafeHouse staff.**

**I understand that if I do not respect matters of confidentiality I will be immediately released from my volunteer assignment at SafeHouse Denver.**

**Volunteer Signature:**

**Date:**

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Please email completed applications to [shobart@safehouse-denver.org](mailto:shobart@safehouse-denver.org) or fax to 303-318-9979, Attn: Sabrina Wright-Hobart, or mail to:

SafeHouse Denver Attn:  
Sabrina Wright-Hobart  
1649 Downing Street  
Denver, CO 80218