



Dear Prospective Volunteer,

Thank you for your interest in volunteering at Youth Pride, Inc. (YPI). It's because of caring, sensitive and compassionate people like you that YPI is able to provide supportive services to lesbian, gay, bisexual, transgender, queer and questioning (LGBTQQ) youth.

YPI is a statewide organization whose programs are dedicated to meeting the social, emotional and educational needs of LGBTQQ youth and young adults (ages 13-23) and their allies. YPI's aim is twofold: 1) to provide the services and opportunities necessary for LGBTQQ youth and young adults to live full, healthy lives and 2) to eliminate society's current bias and bigotry directed at LGBTQQ individuals. YPI works to educate and create systems change and empowers young people (both individually and collectively) to be advocates for change in the communities in which they live, study, work and play.

YPI is currently seeking volunteers to hang out with youth in our Drop-In Center during peak hours (4pm-8pm) and provide support for youth accessing our services. We're also in great need of volunteers to assist with office administration duties and provide program support. As a volunteer, YPI requests that you be available at least one day a week for a minimum of two hours.

The process is simple and begins with completing the application and submitting releases to conduct a Background Criminal Investigation (BCI). **The BCI form must be taken to your local police department (wherever you are a resident) or a state police office so you may be fingerprinted.** The Providence Police Department's BCI phone number is 401.243.6185. You should call them for an appointment if you are a resident of Providence. This is free of charge for residents. Alternately, if you have been fingerprinted in the last year, we will take a copy of your BCI. Once we receive your materials, a short informal interview is conducted with a staff member. During the interview, we'll explore YPI's needs, your skills and interests. Afterwards, you'll participate in short orientation session to familiarize with YPI's culture, youth and staff. The entire placement process should take no more than three weeks.

I look forward to your involvement and am sure the experience will enrich your life as well as the lives of LGBTQQ youth and young adults. Please feel free to contact me if you have any questions.

Sincerely,

James Robinson
Executive Director

Enclosures



don't grow up invisible

Youth Pride Inc.

Volunteer Application

Name: _____ Date: _____

Address: _____

Phone (home) _____ (work) _____

Date of Birth: _____ E-Mail Address: _____

May we contact you at work? Yes No

Who should we contact in case of emergency? _____

What is their relationship to you? _____

Educational Background: _____

Occupation: _____

Do you have transportation constraints? Yes _____ No _____

Do you have any physical limitations? Yes _____ No _____

Describe: _____

What languages do you speak? _____

References (Personal or Professional)

(Name, Phone, and nature of relationship)

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In what capacity do you think you would be interested in volunteering? (Circle area of interest)

Development

Library

Friday Activity

Fundraising/special events

OUTspoken (Speakers Bureau)

Other (please describe) _____

Drop-In Center

Movie/Game Night

Clerical/Administrative

Food Pantry

What kind of time commitment are you able to make? Are there any specific days/time you are available

How did you hear about Youth Pride, Inc.?

What is your experience working with gay, lesbian, bisexual, transgender, queer youth?

What are you hoping to gain from your volunteer experience at Youth Pride, Inc.?

Have you done any volunteer work at other organizations? If so, where and what did you particularly like or dislike about it?

Do you have any special interests or talents that we should know about?

Have you ever been arrested or charged with a felony? If yes, please describe...

Signature: _____ Date: _____

Thank you for your interest in Youth Pride, Inc. Please send your completed application to:

Volunteer Coordinator
Youth Pride, Inc.
171 Chestnut Street
Providence, RI 02903

For office Use Only

Date received:
Date BCI received:
Date interviewed:
Interviewer:
Comments:

Program/Task Assigned:
Supervisor:
Date of Orientation:
Start Date:



171 Chestnut Street
Providence, RI 02903-4604
P: 401.421.5626
F: 401.274-1990
www.youthprideri.org

*****DO NOT RETURN TO YOUTH PRIDE, INC.*****

Date:

To whom it may concern:

Youth Pride, Inc. is a private, non-profit social service agency that provides services to youth ages 13 to 23. I recognize that criminal background checks, and receipt of the results thereof, are required as part of the volunteer application process.

Therefore, I authorize the Rhode Island State Police, and/or your local police station, to provide the results of any and all background checks conducted to Youth Pride, Inc. I understand that I am required to be fingerprinted to allow both local and national criminal records to be accessed in this investigation. I also understand that all disclosed information will be kept confidential.

Name (print) _____ DOB _____
Address _____

Have you ever gone by another name? Y/N If yes, please state all names previously used:

I have read and understand all of the above, and assert that all of the information provided is accurate.

Signature Date

Witness Date

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Office use only Exempt: Yes <input type="radio"/> No <input type="radio"/> Explanation of exemption: _____ Signature: _____ Date: _____
