

HAMILTON COUNTY PROBATION DEPARTMENT  
DIVISION OF MUNICIPAL COURT  
APPLICATION  
FOR  
VOLUNTEER SERVICES

RETURN TO:

Robin Stuessel-Temke, Director of Volunteer Services and Victim Service  
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Cincinnati, OH 45202  
Phone: 852-3795  
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This application is designed as a first step in coming to know you as a potential volunteer. We want you to have a rewarding volunteer experience. At the same time we want to provide the most effective service to the community and to our clients. This information you give us will help determine your suitability for this kind of volunteer work as well as help us match you with the right job or right client.

Therefore, we urge you to be candid and open with us as you respond to these questions, some of which are purposely open-ended and vague. There are no right or wrong answers to some of these questions, but your thoughtful opinion is important to us. As a matter of fact, much of our knowledge in dealing with offenders is more informed opinion than hard fact.

Because of the important, sensitive nature of probation work, we routinely make Court history checks, as we do with all of our paid staff. Such inquiries will only be made with your knowledge and written permission and in such a way as not to embarrass you. Any information obtained through these inquiries will remain confidential within the Probation Department.

Name: \_\_\_\_\_ SS#: \_\_\_\_\_

Address: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Telephone (Home): \_\_\_\_\_ (Business) \_\_\_\_\_

Marital Status (Circle One) S M W D SP How long? \_\_\_\_\_

Education: (Highest grade completed) \_\_\_\_\_

Name of High School or College : \_\_\_\_\_

Major Field of Study: \_\_\_\_\_ Date of Graduation: \_\_\_\_\_

Occupation: \_\_\_\_\_ Work Schedule: \_\_\_\_\_

Employer: \_\_\_\_\_ Address: \_\_\_\_\_

Any special training, skills, hobbies, or interests? \_\_\_\_\_

Have you ever been treated for a physical or emotional conditions which could have an impact upon your ability to do this type of volunteer work? \_\_\_\_\_

(If so, please describe): \_\_\_\_\_

Have you ever been arrested as a juvenile or adult for other than minor traffic violations?

\_\_\_\_\_ (If so, describe): \_\_\_\_\_

Do you drive? (circle answer) Y N : Car available? Y N Valid license: Y N

Insurance? Y N

Any previous experience, paid or voluntary, in working with people? (circle answer) Y N

If so, describe: \_\_\_\_\_

Name of spouse: \_\_\_\_\_ Reaction of spouse? \_\_\_\_\_

Enthusiastic? \_\_\_\_\_ Positive? \_\_\_\_\_ Neutral? \_\_\_\_\_ Negative? \_\_\_\_\_

Would spouse consider joining you as part of a team? Yes \_\_\_ No \_\_\_ Discuss if yes:

Children? Y N Number: \_\_\_\_\_ Age of youngest? \_\_\_\_\_ Oldest? \_\_\_\_\_

My strengths as a volunteer are: \_\_\_\_\_

Some things I may need help with in doing the job are: \_\_\_\_\_

Why do you think people get in trouble? \_\_\_\_\_

How should people on probation be treated? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Do you know anyone on probation? \_\_\_\_\_

My main reasons for volunteering are: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

How did you learn of this program? \_\_\_\_\_

How much time can you give us as a volunteer each week? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

What would be the best days and hours for you? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### **REFERENCE**

Please list two persons other than relatives who would be in a position to give an objective evaluation of you as a volunteer in this type of setting.

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Relationship: \_\_\_\_\_

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

(Authorize and release for Court history checks)