



Volunteer Application

Full Name : _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Employer: _____ Occupation: _____

Employer Address: _____

If student, name of school: _____ District: _____

Parent/Guardian Name: (If under 18): _____

Emergency Contact name: _____ Phone #: _____

Volunteer Tasks at Lettuce Dream: (Choose all that are of interest to you)

___ Grounds Maintenance (mowing, clean up trash, weed control)

___ Maintenance (general repairs and maintenance)

___ Office Support (data entry and spreadsheet, copying, filing)

___ Program Support (helping trainees, plant, harvest, label etc...)

___ Wherever needed

Skills and Interests:

(Examples, photography, art, skilled trade such as an electrician, plumber, accountant)

Volunteer Tasks Cont.... Lettuce Dream Operating Hours: 8:30am-3:30pm but subject to change with notification.

I would like to volunteer as follows (indicate frequency below):

Times a Week every 2 weeks Monthly As Needed Special Project Only

Days of the week I can volunteer: Please check what days you are available.

Monday Tuesday Wednesday Thursday Friday Special Events (Sat.)

Times I can work on days indicated above:

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday(if needed): _____

Volunteer Commitment Statement: Lettuce Dream relies on volunteers as a key component of our operation. Your consistency as a volunteer will help us stay profitable and is imperative that you be here on the times you have stated above please. Emergencies do happen and we will work with you on those types of situations but your signature below confirms your volunteer commitment to the Lettuce Dream Organization. Thank you for choosing to volunteer. Mail your volunteer form to: Lettuce Dream. PO Box 272, Maryville, MO 64468.

Signature: _____

Date: _____

Volunteer Background Check Policy

Lettuce Dream values the safety of those involved in our program. It is our policy to background check all volunteers working with our programs. Volunteers are required to pass this background check before starting any volunteer work.

Lettuce Dream's background check includes a nationwide conviction history check. The applicant's social security number is utilized for the background check, therefore, a social security number is required for ongoing volunteers. The background check must be completed before volunteers are able to be scheduled for volunteer opportunities.

A fee of \$14.25 will be charged to each person that chooses to volunteer with Lettuce Dream. This fee covers the cost of the background check and processing fees. You must complete this registration at: <http://www.mshp.dps.missouri.gov/MSHPWeb/PatrolDivisions/CRID/documents/MO300-1590s.pdf>. This form must be notarized, which can be done in-person at Lettuce Dream's greenhouse (1623 E 2nd Street) by calling (660) 224-2203 and making an appointment with Amy Gessert.

Convictions for the following crimes make an applicant ineligible to volunteer at Lettuce Dream: ● Any felony (any crime punishable by confinement of greater than one year) ● Any gross misdemeanor ● Any crime involving force or threat of force against a person ● Any crime involving controlled substances (not paraphernalia or alcohol) ● Any crime involving cruelty to animals ● Any crime of a sexual nature (including but not limited to sexual conduct with a minor, sexual assault, molestation, sexual abuse, indecent exposure, public sexual indecency, sexual exploitation of a minor, incest, failure to register as a sex offender, etc.) ● Any crime involving child endangerment ● Any crime involving financial exploitations of the elderly or elder abuse

If you fail to pass the background check, you will not be able to volunteer for Lettuce Dream. You will be notified by email if you fail to clear the background check. You are entitled to copies of any public records obtained by Lettuce Dream. If you feel the circumstances around the conviction precluding you from volunteering need further review, or you would like to discuss them further, please contact Lettuce Dream at: (660) 224-2203.

Orientation & Training

All volunteers are asked to attend an orientation prior to their first time of service. The Director or other Lettuce Dream Board/Staff will review the handbook and answer any questions you may have. In addition, they will go over the process for checking in and checking out each time you volunteer. Training for individual tasks will take place on the volunteer's first day.

Please Read Before Signing

I authorize Lettuce Dream to access, review and obtain copies of state and federal criminal history records and make any reasonable efforts to determine whether I have been convicted of, found guilty of, or pled guilty to committing, attempting to commit or conspiring to commit, any crime that may bear upon my fitness to be a volunteer for a position of trust over individuals with disabilities and convey that determination to the qualified entity. I hereby release and hold harmless Lettuce Dream, including its Board of Directors, employees, agents from any and all claims, demands and causes of action which I may now or may ever have by reason of or on account of, authorizing the release of, accessing, obtaining copies of or furnishing such information.

I understand that the relationship between Lettuce Dream and the volunteer is an "at will" arrangement that may be terminated at any time without cause by either the volunteer or Lettuce Dream.

In course of volunteering for Lettuce Dream, I understand I may be dealing with confidential information and I agree to keep said information in the strictest confidence.

As a volunteer I waive and release all claims against Lettuce Dream, its Board of Directors, employees, volunteers or program participants for any and all injuries and/or losses sustained by myself, my heirs and assigns while volunteering at Lettuce Dream.

I understand that it is my responsibility to notify Lettuce Dream of any change of information provided in this application during the time I serve as a Lettuce Dream volunteer.

I give Lettuce Dream permission to use my name, picture, or video for media releases, newsletters, & marketing materials solely for the purpose of promoting Lettuce Dream.

I declare that I am the person referred to in this application, that the information supplied is true to the best of my knowledge, that I have read and understand this application and further understand that any false, misleading, or incomplete information substituted for accurate information will be grounds to immediately remove me as a volunteer with Lettuce Dream.

Signature: _____ Date: _____

*An equal opportunity/access/affirmative action/pro-disabled and veteran employer

FOR OFFICE PURPOSES ONLY: TODAY'S DATE: _____

____ Background Check Fee Obtained

____ T-shirt Size Needed

____ Volunteer Notified on the following date: _____

Attach copy of photo ID (government issued)