

## Advocacy Volunteer/Internship Application

### Instructions

Please review and complete this application to the best of your ability and return to [advocacydepartment@hopesacpc.org](mailto:advocacydepartment@hopesacpc.org).

### Contact Information

Name		
18 years of age or older?	Yes _____	No _____
Street address		
City, State, Zip Code		
Phone Number		
E-Mail Address		
Do you have access to your own vehicle?	Yes _____	No _____

### Program Interests

Tell us in which areas you are interested in volunteering/interning (24/7 Victim Advocacy required for all):

\_\_\_\_\_ **24/7 Victim Advocacy** (Direct client service focus)

- Phone & in-person support
- Crisis intervention, Information & Referral, General, Medical and Legal support
- Requires completion of one (1) state training offered every February, June and October by Rebuilding Hope or WCSAP (Washington Coalition of Sexual Assault Programs)

\_\_\_\_\_ **Sex Trafficking & Exploitation Program (STEP)** (Direct client service focus)

- In addition to what's listed under 24/7 Victim Advocacy: 8+ hours training required specific to commercial sexual exploitation.
- Completed minimum of 3 months with 24/7 Advocacy to be considered for STEP; commit to 3 additional months volunteering with STEP
- Good record of service, demonstration of direct service and administrative capabilities

\_\_\_\_\_ **Prevention Education Program** (community outreach focus)

- Complete requirements for 24/7 Victim Advocacy section and a minimum of 1 month on the 24/7 hotline
- Table at outreach events
- Provide prevention education at K-12 schools and universities
- Provide prevention education to community groups and partners
- Create prevention materials (flyers, posts, giveaways)

**Acknowledgement**

**\*Please Note: All Rebuilding Hope volunteers/interns must be vaccinated against COVID-19 and show proof of vaccine status upon onboarding and must also complete a finger-printing background check in addition to a WSP and NSO background check.**

\_\_\_\_ Initial here to acknowledge you are vaccinated and can comply with providing proof of vaccination and background checks.

Your commitment to Rebuilding Hope! as a volunteer or intern is for a MINIMUM OF 6 MONTHS following the completion of your training requirements (refer to the job description below). Can you reasonably commit to this time frame?

Please indicate one: YES \_\_\_\_\_ NO \_\_\_\_\_ MAYBE \_\_\_\_\_

Would you be considering a longer commitment? If so, how long? \_\_\_\_\_

**Availability**

During which hours are you available for 24/7 advocacy shifts or support for other interests/activities?

	12 am-8 am	8 am-4 pm	4pm-12am
Weekdays			
Weekends			

Other availability options, please share here:

**Interests**

Briefly explain your interest in volunteering/interning for Rebuilding Hope:

What do you hope to gain from your experience at Rebuilding Hope?

**Special Skills or Qualifications**

**Please attach a copy of your current resume to accompany this information.**  
Summarize your previous relevant or related professional experience, whether it be from employment, volunteer, or internship experiences.

**References**

Please provide two references we could contact (Not related):

Name	Phone Number	Email
1.		
2.		

**Person to Notify in Case of Emergency**

Name	
Street Address	
City, State, Zip Code	
Cell Phone	
Work Phone	
E-Mail Address	

**FOR STUDENT INTERNSHIP CANDIDATES ONLY**

**\*Currently do not have an MSW supervisor on site\***

Sponsoring School: \_\_\_\_\_ Department: \_\_\_\_\_

Academic Supervisor: \_\_\_\_\_ Credit Hours: \_\_\_\_\_

Actual Hours to work/week or month: \_\_\_\_\_

Internship Dates: \_\_\_\_\_ - \_\_\_\_\_



## REBUILDING HOPE! SEXUAL ASSAULT CENTER FOR PIERCE COUNTY VOLUNTEER/INTERN ADVOCATE JOB DESCRIPTION

**Commitment:** Please note that student interns are held to the same time commitment as volunteer advocates regardless of the timeframe of their internship. Interns are held to a 6-month time commitment with Rebuilding Hope regardless if their internship is only for one quarter or one semester. Please discuss your internship interests and availability with us at an interview so an individualized internship plan can be proposed.

**Note:** We encourage you to coordinate contact between Rebuilding Hope! and your sponsoring school/academic supervisor in advance so we can communicate our expectations of student interns prior to completing an interview with our department.

Rebuilding Hope! Sexual Assault Center for Pierce County values the commitment you have made to serve survivors of sexual violence through our agency. **To support you in this effort we will provide you with:**

1. Thirty+ hours of Basic Sexual Assault Awareness Training and eight plus (8+) hours of Advocacy Training in office and ongoing Crisis Line Training facilitated by the agency.
2. Monthly Advocate Training/Meetings.
3. Back-up support and supervision when you are providing advocacy services to individuals impacted by sexual violence.

### **AS AN ADVOCATE, YOU WILL BE REQUIRED TO:**

1. Uphold all agency and Departmental Policies to include Confidentiality Policy and Mandatory Reporting Policy.
2. Be available for calls on all scheduled shifts; be accountable to making independent, reasonable efforts to have your shift covered by another member of the Advocacy team if you experience a serious conflict with your shift.
3. Attend all Monthly Advocate Meetings, receiving twelve hours of certified ongoing training (required by the State) through meeting attendance. Refer to the Program Coordinator for the Missed Meeting Policy.
4. Abstain from using or being under the influence of alcohol or drugs during your shift work and/or when formally representing the agency.
5. Complete all required paperwork/database entries fully, correctly, honestly and within 48 hours of the client contact.
6. Make a **minimum of a 6 month commitment** to serving as an advocate with our agency, even if your internship is limited to a time frame that is less than 6 months. The 6 month time frame begins from the time you take your first independent shift on the hotline.
7. Cover a **minimum of 64 advocacy hours** per month (8 8-hour shifts/month; averaging 2 shifts/week). At the discretion of the Program Coordinator, special accommodations can be discussed for monthly shift requirements.

### **Confirmation of Receipt & Acceptance of Advocate Job Description**



I have read and understand the responsibilities of Rebuilding Hope regarding the advocate job description. I understand that I may be terminated as an advocate for failure to fulfill these responsibilities or for unsatisfactory work performance as determined by the Program Coordinator and Program Manager. I understand that I may also be terminated if I am charged with a crime of abuse, assault, and neglect or charged with any felony.

\_\_\_\_\_Initials

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that the Child/Adult Abuse Information Act mandates that a background check be conducted on me by this organization. The background check is for the initial screening and decision making of potential employees, volunteers, and interns only. I understand that if I am accepted as a volunteer or intern, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. \_\_\_\_\_Initials

### Our Policy

In order to serve all victims/survivors, Rebuilding Hope strives to be fully accessible to all members of the community. We also acknowledge that victims/survivors with marginalized and intersecting identities and experiences have historically been harmed by society and overlooked by social service providers and systems, which negatively impacts their ability to equitably access support services. Rebuilding Hope serves individuals who have had their lives impacted by sexual assault and abuse without discrimination based on race, ethnicity, color, religion, disability, pregnancy, national origin, sexual orientation, gender identity or expression, age, income, veteran status, marital status or any other basis prohibited by local, state or federal law.

Thank you for completing this application form and for your interest in volunteering with us.



**Enhanced Background Check Procedure and Release**

**Background:** Rebuilding Hope requires all volunteers, interns and staff who will have access to minors and clients, in general, to be cleared through a comprehensive background check procedure to include:

1. Public sex offender and child abuse websites/registries to include:
  - a. **Completed before employment/volunteer offer is made and ever year after hire**
  - b. The Dru Sjodin National Sex Offender Public Website ([www.nsopw.gov](http://www.nsopw.gov));
  - c. The website/public registry for each state (and/or tribe, if applicable) in which the individual lives, works, or goes to school, or has lived, worked, or gone to school at any time during the past five years
  - d. The website/public registry for each state (and/or tribe, if applicable) in which the individual is expected to, or reasonably likely to, interact with a participating minor in the course of activities under the award.
2. Criminal history registries and similar repositories of criminal history records.
  - a. **Completed before employment/volunteer offer is made and ever year after hire**
3. An eligible fingerprint search/background check.
  - a. **Completed after employment/volunteer offer is made and accepted**

I, [print name] \_\_\_\_\_ give permission to Rebuilding Hope! to collect the following information required to complete the aforementioned enhanced background check procedures and agree to comply with additional requirements towards submitting an eligible fingerprint upon hire/start.

Name: [First, middle initial and last name]: \_\_\_\_\_

Aliases: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex \_\_\_\_\_

Race: \_\_\_\_\_

Have you lived, worked, or gone to school outside of Washington State within the last 5 years?  
No \_\_\_ Yes \_\_\_. If you answered yes, please provide the states you have lived, worked or attended school in with the years included.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Note:** Comprehensive background checks will be completed prior to hiring/on-boarding and will be completed annually for as long as the individual is providing work on behalf of the agency.

\_\_\_\_\_  
Your Signature

\_\_\_\_\_  
Date

