

**The CARE Project Ohio Retreat Volunteer Application
Nationwide Hotel & Conference Center
100 Green Meadows Drive S, Lewis Center, Ohio 43035
November 1-3, 2019**

Please fill out one form per participant, not per family.

Please return completed applications to lara@thecareproject.com

GENERAL INFO

NAME
EMAIL
PHONE
ADDRESS

What is your previous experience with The CARE Project? How did you find out about the Family Retreat in OH?

VOLUNTEER REQUIREMENTS

1. All volunteer candidates must apply to be considered and must be approved by the Executive Director.
2. All volunteers who are approved must agree to be assigned a task/job, as designated by the Retreat Director.
3. All volunteers who are approved must agree in writing to adhere to the NO ALCOHOL POLICY for the entire retreat weekend.
4. All volunteers must agree in writing to withhold personal bias regarding communication methodology, technology, education, etc. when engaging with families during the entire retreat weekend.
5. All volunteers must be willing to share a room with another volunteer.
6. All volunteers must be willing to work in childcare, caring for children who are Deaf or Hard of Hearing and their siblings.

**All volunteers must complete and pass a criminal background check in order to be selected. Please do so at this website: <https://bib.com/SecureVolunteer/The-CARE-Project/>
Without a background check you will not be eligible to volunteer.**

VOLUNTEER PREFERENCES

Please indicate your preferred area of participation

Volunteer Role

_____ Work in childcare with younger and older kids

_____ ASL Interpreter

_____ Transliterator

What shifts are you available to work?

_____ Saturday 7:30 am – 12:30 pm

_____ Saturday 1:00 pm – 6:00 pm

_____ Sunday 7:30 am – 12:30 pm

_____ Entire Retreat

Will you be a commuter or need housing for the retreat?

_____ Commuter

_____ Need Housing

Do you need any special accommodations?

_____ No

_____ Yes: _____

What experience do you have working with children who are deaf or hard of hearing?

No Alcohol Policy

By signing this policy, you are stating you will not consume alcohol in any form in 8 hours prior to the event nor will you consume alcohol while volunteering for The CARE Project. Per our insurance and volunteer guidelines, no alcohol may be consumed while volunteering your time.

Bias Statement

The CARE Project (TCP) supports all decisions made by parents/families. TCP does not prescribe to one single philosophy, communication modality or technology. Giving emotional support, information, education and skills is first and foremost the focus of TCP.

Therefore, it is required by TCP that all volunteers and speakers for TCP Retreat experiences refrain from sharing personal opinions and biases regarding the topics: communication modality, technology, educational setting and/or philosophy. TCP strives to create a safe and comfortable environment during the retreat experiences to allow families to process their emotions, meet new families, connect and bond. The retreats focus on the one thing all the attendee families have in common: having a child who is deaf or hard of hearing.

Please sign below that you, as a volunteer and/or speaker, have read this policy statement and agree to adhere to it during the retreat experience for which you are involved.

Thank you for understanding TCP’s desire to create a stress-free environment for the families who join us for TCP Family Retreats!

Signature

Date