



Why do you want to become involved in our volunteer advocate program? \_\_\_\_\_

What has been your involvement and/or past experience with domestic violence, if any? \_\_\_\_\_

How long ago? \_\_\_\_\_ *\*\* Because of the traumatic nature of domestic violence, DVS requires that all volunteers have been free of domestic violence for at least one year.*

**Do you have a current WA State Drivers License?** Circle: YES / NO

If yes, do you carry at least the minimum requirements for liability insurance in the state of Washington?

Circle: YES / NO

**Character Reference:** List three persons, not related to you (please have complete addresses) who have definite knowledge of your ability to carry out the volunteer position for which you are applying.

Name: \_\_\_\_\_

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

Phones Number(s): \_\_\_\_\_

How long have you known him/her? \_\_\_\_\_

*\*\* for staff use only: Date checked \_\_\_\_\_ Staff initials \_\_\_\_\_*

Name: \_\_\_\_\_

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

Phones Number(s): \_\_\_\_\_

How long have you known him/her? \_\_\_\_\_

*\*\* for staff use only: Date checked \_\_\_\_\_ Staff initials \_\_\_\_\_*

Name: \_\_\_\_\_

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

Phones Number(s): \_\_\_\_\_

How long have you known him/her? \_\_\_\_\_

*\*\* for staff use only: Date checked \_\_\_\_\_ Staff initials \_\_\_\_\_*

I \_\_\_\_\_, authorize contact of reference and a criminal background check to be completed prior to my placement in a volunteer position. I understand that in order to become a volunteer at DVS I must be over 18. In addition, I must complete a background check, sign a confidentiality contract, and complete 40 hours of training (including 20 hours classroom, and 20 hours shadowing). I hereby volunteer my service and understand that I am not a paid employee of DVS.

\_\_\_\_\_  
Signature of volunteer advocate applicant