

# Make-A-Wish<sup>®</sup>

## UTAH

*Thank you for your interest in volunteering with Make-A-Wish<sup>®</sup> Utah. Behind every Make-A-Wish experience, there are volunteers filling a multitude of roles. Their commitment is what drives Make-A-Wish and allows us to create life-changing wishes for children with critical illnesses.*

### **HOW DO I BECOME A VOLUNTEER?**

To provide the wish children and families with the best experience possible, we require all potential volunteers to go through an assessment before becoming an active Make-A-Wish volunteer.

Volunteer paperwork takes about 3 weeks to process and approve. After your paperwork is processed, you will be contacted with detailed instructions for the next steps based on the opportunities you selected. Please note, volunteer needs may vary by chapter needs.

### **WHY DO I NEED A BACKGROUND CHECK?**

Due to the nature of our work, volunteer positions must successfully complete a criminal background check every 3 years. Make-A-Wish does not employ or utilize as a volunteer any individual who has been convicted of a crime that (a) victimizes children, (b) is sexual in nature, or (c) involves violence, fraud, or significant theft. Please contact us with any questions related to past convictions and/or our background check screening process.

### **WHO DO I CONTACT WITH QUESTIONS?**

Our team is happy to answer any questions or address any concerns that you may have.

- **Volunteer Manager:** Jenny Hortin, (801)305-1975 or [jhortin@utah.wish.org](mailto:jhortin@utah.wish.org)
- **Make-A-Wish Utah:** (801)262-9474 or [www.utah.wish.org](http://www.utah.wish.org)

### **HOW DO I SUBMIT MY APPLICATION?**

Please complete and submit pages 2-6 of this packet to our office via fax, email or mail.

Make-A-Wish Utah  
Attn: **Volunteer Services**  
771 E Winchester, Murray, Utah 84107  
[jhortin@utah.wish.org](mailto:jhortin@utah.wish.org)  
Fax: (801)262-1294

### **PRIVACY & PROTECTION OF INFORMATION**

Security of information is extremely important to us. All information submitted is available to and accessed by only relevant personnel. Information is never sold or shared outside of Make-A-Wish.



# Volunteer Application

All volunteer opportunities require the completion of this application, a signed Conflict of Interest and Ethics Statement, and training relevant to the desired opportunity. In addition, opportunities require a criminal background check performed every three years.

## Personal Information

Title:	Name: First	Middle	Last
Nickname:			
Address: Street		City	State      Zip
County:		Date of Birth:	
		I am 18 or older: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone: Home	Mobile	Preferred Phone: <input type="checkbox"/> Home <input type="checkbox"/> Mobile	
Email:		I am on Facebook: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Once approved, volunteers are invited to participate in our closed Volunteer Facebook page.			

## Employment Information

Employer:	Position:		
Address: Street	City	State	Zip
Work Phone:	May we contact you at work? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Would you like to <i>share the power of a wish</i> ® at work by learning how your company can partner with Make-A-Wish Utah? <input type="checkbox"/> Yes <input type="checkbox"/> No			

## Emergency Contact Information

Emergency Contact:	Relationship:
Emergency Contact Phone:	

## How did you hear about Make-A-Wish?

- |   |  |
|---|--|
| <input type="checkbox"/> Aware of a wish family who experienced a wish: _____ | <input type="checkbox"/> Family: _____                 |
| <input type="checkbox"/> Civic organization: _____                            | <input type="checkbox"/> Friend: _____                 |
| <input type="checkbox"/> School/University: _____                             | <input type="checkbox"/> Media/Public Relations: _____ |
| <input type="checkbox"/> Employer: _____                                      | <input type="checkbox"/> Other: _____                  |

## Professional Skills – Select those skills in which you have a professional capability.

- |  |                                       |
|--|---------------------------------------|
| <input type="checkbox"/> Construction / Carpentry    | <input type="checkbox"/> Professional |
| <input type="checkbox"/> Entertainment Skills        | Certifications _____                  |
| <input type="checkbox"/> Graphic Design / Art Design | <input type="checkbox"/> Scrapbooking |
| <input type="checkbox"/> Interior Decorating         | <input type="checkbox"/> Writing      |
| <input type="checkbox"/> Photography                 | <input type="checkbox"/> Other: _____ |

**Language Skills** – If you are fluent in another language, please check all that apply.

	Read	Write	Speak	Understand
American Sign Language				
Arabic				
Chinese				
French and French Creole				
German				
Hindi				
Italian				
Japanese				
Korean				
Polish				
Portuguese				
Russian				
Spanish				
Tagalog				
Vietnamese				
Other:				

**Criminal Background Check Search / Address History**

Volunteer opportunities require a criminal background check performed every three years. Our criminal background check search includes a social security number verification and search of all aliases used by the individual, as well as all records in the counties in which the individual has resided for at least seven years and in a national database. If you have lived outside of the US within the past 7 years, additional checks and/or proof of clearance may be required.

I have resided in the United States for the last 7 years:  Yes  No

**Passion for the Cause**

In a few words, describe yourself and what motivated you to volunteer at this time in your life.

What are you looking to gain from this volunteer experience?

**Volunteer History**

Do you have volunteer experience?  Yes  No

If yes, please list, beginning with your present or most recent experience.

Organization Name:
Dates of Service:
Position/Duties:
Contact Name:
Phone Number:

Organization Name:
Dates of Service:
Position/Duties:
Contact Name:
Phone Number:

Have you ever been asked to relinquish a volunteer position?  Yes  No  
If yes, please explain:

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Are you associated with any other charitable, civic or business organizations?  Yes  No  
If yes, please list organizations:

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**Personal or Professional Reference- Full address is required**

Please provide COMPLETE information for two non-family references:

Name:		
Address:		
City:	State:	Zipcode:
Phone Number:		
Email:		

Name:		
Address:		
City:	State:	Zipcode:
Phone Number:		
Email:		

## Volunteer Roles

- Wish Ambassador – Share the mission and magic of Make-A-Wish Utah through community engagement to raise awareness and increase public support.
  
- Wish Assistant – Join the staff team to help answer the telephone, greet guests, and assist with special office projects.
  
- Wish Apprentice – Join the wish granting team to help with special assignments relating to a child’s wish. (Ages 16 – 21)
  
- Translator/Interpreter – Help facilitate wish experiences for non-English-speaking families or assist with translation requests (as needed).
  
- Wish Granter – As a member of a wish team, wish granters meet with the family, help the wish child determine the wish, and act as a liaison between Make-A-Wish staff and the wish family during the wish process. Wish Granters must be a minimum of 21 years old. Attendance at an in-depth training session is required.

I affirm that the information I have given on this form is true and correct. The information that I have provided may be verified by contacting persons or organizations named in this application, or by contacting any person or organization that may have information concerning me, or by conducting a criminal background check.

I have read and understood the various volunteer roles and am able to perform those roles for which I've applied. I am volunteering my time for personal reasons and understand I will not be paid for my services as a volunteer and I expect no compensation. Furthermore, I understand that this application will help in determining the best fit of my skills for Make-A-Wish.

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



## **ANNUAL CONFLICT OF INTEREST AND ETHICS ASSURANCE STATEMENT**

As an employee or volunteer of the Make-A-Wish Foundation (the "Foundation"), I have an obligation to the Foundation and the constituencies it serves to comply with the highest standards of ethical conduct. I will not commit acts contrary to those standards, and I will promptly report to appropriate Foundation representatives – either directly, or through MySafeWorkplace (a 24-hour confidential whistle-blower hotline that can be accessed at [www.MySafeWorkplace.com](http://www.MySafeWorkplace.com) or by calling 1-800-461-9330) – the commission of any such acts by others within the Foundation. I understand that my responsibilities include the following:

### **Ethics and Legal Assurance**

- I will at all times: (a) perform my duties in accordance with relevant laws, regulations and Foundation policies and standards; (b) promote the attainment of the Foundation's legitimate and ethical objectives; and (c) represent the interests of all constituencies served by the Foundation and not favor special interests inside or outside the Foundation in connection with Foundation business.
- I will refrain from: (a) violating any criminal or civil law or regulation, the violation of which may reflect poorly on the Foundation; and/or (b) engaging in or supporting any activity that would discredit the Foundation.
- I will submit to a criminal background check every three years (or more frequently if required by the Foundation), and I agree to disclose at the time I execute this document and thereafter as the same may arise any official investigations of criminal activities, arrests and/or convictions involving me (other than for routine traffic offenses not involving drugs or alcohol).

### **Conflict Of Interest**

- I will either avoid, or will promptly disclose and recuse myself from any decisions involving, any activity or practice which conflicts with, or can be perceived as conflicting with, the interests of the Foundation, including but not limited to situations where I, or a relative, friend or business acquaintance of mine, proposes to provide goods or services to the Foundation for consideration.
- I will refrain from using Foundation property or resources for personal profit or advantage, or for any purpose not related to the activities of the Foundation.
- I will refuse any personal gifts, loans, favors or other consideration of more than nominal value from any Foundation vendor, sponsor or other outside party that would influence, or could be perceived as influencing, my actions or the actions of others.

### **Confidentiality**

- During my involvement with the Foundation and thereafter, I will maintain the confidentiality of any information regarding the Foundation, wish children and their families, donors and volunteers that has not been released publicly, unless legally obligated to do otherwise.
- I will refrain from using or appearing to use confidential information acquired in the course of my service for unethical or illegal advantage, either personally or through third parties.

**I have read, understand and agree to be bound by the above standards.**

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Print name

Signature

Date