



Thank you for your interest in volunteering at PARC!

We are so fortunate to have so many different people come to our programs and make a difference in the lives of children and adults with developmental disabilities.

To volunteer we have the following guidelines:

1. Each person will fill out an application and submit to the Community Relations Department. This includes all student volunteers and court ordered volunteers who will be volunteering for a limited amount of time. At this time, the applicant will receive information on PARC to make sure that the volunteer opportunities are clear to the applicant. *Individual volunteers must be at least 16 years old.*

Court Ordered applicants are taken on a case by case basis and will only be accepted for weekends only in the PARC Thrift Store.

Applications can be downloaded on PARC's web site at www.parc-fl.org.

2. PARC will perform a background screening for every applicant through the FDLE. Out of the safety and concern for our program participants and as a licensing agreement, a person with certain felony convictions will not be able to volunteer in the direct care program areas. This will be addressed on an individual basis. Applicants will be asked to sign an Affidavit of Good Moral Character from the Department of Children & Families which details criminal activities that will disqualify applicants.

3. After the application has cleared the background screening and the initial interview, the volunteer applicant will attend a scheduled volunteer orientation. During the orientation, the volunteer will learn about volunteerism at PARC as well as ask questions about the role of the volunteers at the agency. The volunteer will be made aware of policies and procedures that directly affect their involvement at PARC.

Please call Kelli Caputo at 727-341-6930 or email kcaputo@parc-fl.org with any questions.



Volunteer Application

Teen Program – Must be 16 years old

Date _____

(Please Print)

Name _____
Last First Middle

Address _____
Street Address (Including City, State and Zip Code)

Telephone (Home) _____ Cellular Phone _____

Email _____ Date of Birth (month/day/year) _____

Parent/Guardian Name _____

Address (if different from above) _____

Parent Cellular Phone for additional emergency phone _____

School you currently attend _____ What year will you graduate? _____

Name of Program & Hours required (if applicable) _____

School activities you are involved in _____

Special skills, interest or hobbies _____

How did you hear about volunteer opportunities at PARC? _____

Please list any relatives you have working at PARC _____

Why would you like to volunteer at PARC? _____

Availability Mon Tues Wed Thurs Fri Sat Sun
 Mornings Afternoons Evening

Have you done or are you currently doing any other volunteer work? If so, please explain

Do you have any physical limitations that may require a reasonable accommodation in order for you to perform your duties? Yes / No

Please explain _____

(SEE REVERSE)

Have you ever been convicted of a felony, misdemeanor, or other criminal offenses and/or are there any arrests or criminal proceedings pending against you?

Yes / No (Circle one) If Yes, please explain _____

References: two (2) references are required by PARC's funding agencies

1. _____
Name _____ Relationship _____
Address _____ Zip _____ Phone _____

2. _____
Name _____ Relationship _____
Address _____ Zip _____ Phone _____

Statement of Agreement
(Please read carefully)

I certify that the information given by me in this application is true in all respects and that I have not made any willful omissions. I agree to abide by all present and subsequent rules and regulations of PARC and I understand such rules and regulations may be modified at any time PARC determined that it is necessary. I understand that disclosure of confidential information concerning PARC or a client may be grounds for immediate dismissal. As a volunteer, I agree to attend orientation and participate in appropriate in-service programs as needed to fulfill my duties. I understand that volunteering at PARC does not imply an advantage toward future employment.

Applicant Signature _____ Date _____

I agree to allow my teen to participate as a volunteer at PARC. I believe my teen is disciplined and capable of carrying out assignment at PARC and understands the important of following PARC policies and procedures. It is my understanding that I am responsible for my teen child at all times and that my teen child will receive the supervision of PARC only while signed in through the Volunteer Department and participating in a scheduled volunteer assignment.

Parent/Guardian Signature _____ Date _____

Interviewer _____ Date _____

For Internal Use Only

Court Appointed Y / N _____ Hours Required _____

Background _____ Other _____

Orientation _____ Placement _____

VOLUNTEER REFERENCE LETTER

Date _____

_____ has agreed to volunteer at PARC. Our funding agencies require two references for volunteers. Your participation is appreciated.

How long have you known the volunteer named above? _____ Yrs. _____ mos.

Is your experience with he/she in business, civic, social, church, family friend etc.

To your knowledge is there any reason why he/she should not volunteer with children and/or adults with developmental disabilities.

Yes _____ No _____

If yes, please explain _____

Would you recommend he/she to volunteer at PARC? Yes _____ No _____

Comments (Optional) _____

Printed Name _____ ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

PHONE NUMBER _____ (No solicitations will occur.)

Signature _____ Date signed _____

Thank you for taking the time to fulfill this request.

Sincerely,

Kelli Caputo

Kelli Caputo
Director of Community Relations - Volunteer Program

PARC
3190 Tyrone Blvd. North
St. Petersburg, Florida 33710
727-345-9111 • Fax 727-345-7130

Please visit our website to learn more about PARC, our programs and the people we serve.

www.parc-fl.org



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