



Earning A Future Through Service Today

Student Volunteer Application

2014-2015

I. Student Personal Information

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Gender: Male Female Birthdate: _____ Age: _____

School Name: _____ Grade Level: _____

Partnered Organization: _____ T-Shirt Size: _____

Race/Ethnicity:

- | | |
|--|---|
| <input type="checkbox"/> African American/Black | <input type="checkbox"/> Multiracial/Other |
| <input type="checkbox"/> Caucasian/White | <input type="checkbox"/> Hispanic/Latino |
| <input type="checkbox"/> Asian American/Pacific Islander | <input type="checkbox"/> American Indian/Alaskan Native |

II. Parent(s)/Guardian(s) Information

First Parent: Father Mother Non-Parent Guardian

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email Address: _____

Cell Phone: _____ Work Phone: _____

Second Parent: Father Mother Non-Parent Guardian

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Email Address: _____

Cell Phone: _____ Work Phone: _____

III. Family Information

Parents are Married Divorced Separated Single Widowed

Number of dependents in your family where you live, EXCLUDING your parents, INCLUDING yourself: _____

Ages of those included in the number above: _____

Number of dependents in college, university, vocational school, or military next year, EXCLUDING parents, INCLUDING yourself: _____

Gross Annual Family Household Income (IRS tax form 1040, 1040A, or 1040EZ): \$ _____

***PLEASE NOTE: Maximum household income is \$65,000 per year.**

IV. Additional Information

Please answer each of the following questions with at least two complete sentences.

1. Why do you want to be a part of Kym's Kids of San Antonio?

2. Choose an experience from your life and explain how it has influenced you.

3. What are your goals after high school?

4. How would this scholarship affect your education?

5. Who is someone you look up to and why?



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Recommendation Form

I. To the Applicant

Please fill out your information and have your recommender fill out the information in the "To the Recommender" section. Remember, your recommender should be a coach, teacher, or adult mentor (**not** a friend or relative).

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

II. To the Recommender

The young person named above is applying to be a student volunteer in Kym's Kids of San Antonio. This program brings together a diverse group of middle and high school students in service-learning activities and leadership development opportunities.

Kym's Kids of San Antonio requires its student volunteers to be committed and willing to try new experiences and exhibit a positive attitude. Your recommendation is a very important part of the application process and we greatly appreciate your assistance.

PLEASE COMPLETE BOTH THIS FORM AND THE SURVEY ON THE NEXT PAGE AND RETURN IT TO THE APPLICANT AS SOON AS POSSIBLE.

Recommender's Name: _____

Organization and Position: _____

Work Phone: _____ Home Phone: _____

Relation to the Applicant: _____

How long have you known the applicant? _____

(Please see next page)

III. Rating the Applicant

Please rate the applicant on the following attributes.

	Never	Rarely	Sometimes	Often	Always
Follows through on commitment.	1	2	3	4	5
Gets along with peers.	1	2	3	4	5
Likes new challenges.	1	2	3	4	5
Has a positive attitude.	1	2	3	4	5
Willing to follow directions.	1	2	3	4	5
Respects leadership and authority.	1	2	3	4	5
Easily motivated.	1	2	3	4	5

IV. Short-Answer Questions

1. What are the first words that come to mind when you think of the applicant? Please explain.

2. Kym's Kids will be assisting many populations including people who are senior citizens, young children, physically challenged, hospitalized, and homeless. How well do you think the applicant will work with these populations? Why?

3. Please provide us with any additional information you wish to share with us regarding the applicant.

THANK YOU FOR YOUR INPUT AND SUPPORT!



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Program Code of Conduct and Agreement

In order to preserve the quality and integrity of the K. Rapier Kids, Kym's Kids of San Antonio (Kym's Kids) program and its participants, we ask that all student volunteers agree to abide by the policies and procedures set forth in this Code of Conduct and Agreement.

Volunteer Hours and Academic Requirements

At least fifty percent (50%) of the applicable volunteer hours must be served at Kym's Kids-sponsored events. All student volunteers will remain informed of program activities and events via postal and electronic mail communication, but are encouraged to track their hours and activities on their own. The table below outlines the minimum requirements per grade level.

Grade Level	Service Hours	Min. GPA	Min. Attendance	Potential Scholarship
8th	60	2.0	93%	\$500
9th	60	2.0	93%	\$500
10th	70	2.5	93%	\$600
11th	80	2.5	95%	\$700
12th	80	2.5	95%	\$1,000

Student volunteers must ensure they are present for any Kym's Kids events for which they have registered to volunteer. Those who are unable to attend a registered event are to inform their Kym's Kids coordinator before the registration deadline in order to avoid consequences. Registration deadlines fall on the Friday before each event takes place.

Student volunteers must also meet the minimum academic requirements in order to qualify for scholarship awards each year. Kym's Kids tracks each volunteer's academic records through report card submission at the end of each grading period. Partnered organizations will mediate the information from the volunteers' schools to Kym's Kids coordinators. Parents of student volunteers under the age of 18 must authorize the release of this information.

Additional Hourly Requirements (Seniors Only)

All Seniors are REQUIRED to attend one 4-hour session held at Café College. Each session will count as 4 hours towards the total Kym's Kids hours. Information about these sessions will be included on the monthly Kym's Kids calendars, and will only be offered three times throughout the school year. Café College will be presenting the following topics in this mandatory session:

- 1) Time Management
- 2) Balancing Social Life and Studies
- 3) Techniques for Being a Successful Student
- 4) Family Balance

Scholarship Expiration

Student volunteers must keep in mind that their scholarships have an expiration date unique to their date of graduation. Scholarships that are not used within a year after the student volunteer's graduation date will expire, and the student volunteer will forfeit the scholarship award. *If a student joins the military, the scholarship will no longer apply, and will be forfeited upon the end of the 12th grade year.*

Service at the Discretion of Kym's Kids

Kym's Kids accepts the service of all student volunteers with the understanding that such service is at the sole discretion of Kym's Kids. Student volunteers agree that Kym's Kids may, at any time and at their discretion, terminate the student volunteer's relationship with Kym's Kids.

Representing Kym's Kids

Student volunteers are asked to not contact organizations or individuals on behalf of Kym's Kids unless they are given directions to do so by the executive director. Prior to any action or statement which might significantly affect or obligate Kym's Kids, student volunteers should seek prior consultation and approval from appropriate staff. These actions may include, but are not limited to, public statements to the press, collaboration efforts with other organizations, or any agreements involving contractual or other financial obligations. Student volunteers are authorized to act as representatives of Kym's Kids only as specifically indicated within their task descriptions.

Dress Code

At each Kym's Kids event, student volunteers are required to wear their official Kym's Kids t-shirt, khaki/denim pants, and tennis shoes. No shorts allowed.

Confidentiality

Student volunteers are responsible for maintaining the confidentiality of all proprietary or privileged information to which they are exposed while serving as a volunteer whether this information involves a staff member, volunteer, client, other person, or general Kym's Kids business.

Screening/Reference Checks

Student volunteers over the age of 18 are subject to a criminal background check.

Copyright and Ownership Issues

Material produced by volunteers for Kym's Kids including graphics, web page designs, narratives, research, compilations, and instructional texts becomes the property of Kym's Kids upon submission.

Contacting Other Student Volunteers and Staff

The safety and privacy of all our student volunteers is important to us. Occasionally, student volunteers will need to contact other student volunteers and staff with regard to their activities with Kym's Kids. Kym's Kids will not share personal contact information about a student volunteer with another volunteer without the expressed consent of all parties involved.

Inappropriate Communications

Volunteers who feel that they have received any form of communication that is inappropriate, for any reason, and believe they have received it in conjunction with their involvement with Kym's Kids must forward the details about the communication to the executive director of Kym's Kids.

Kym's Kids student volunteers and parents/guardians shall have no direct personal contact with the Rapiers except through the chain of command. All contact including, but not limited to, mail, email, phone, text or personal contact with Kym's Kids for the Rapiers will be through the Kym's Kids staff only and shall exhibit the mutual respect normally expected in a professional environment. Violation of this request will result in automatic termination from the Kym's Kids program.

Kym's Kids and parents/guardians participants shall refrain from asking Kym's Kids or the Rapiers for financial assistance, loans, sponsorships or scholarships. Violation of this request will result in automatic termination from the Kym's Kids program.

Ending Your Volunteer Role

Student volunteers may end their enrollment with Kym's Kids at any time with any form of written notice, i.e. e-mail or correspondence. Student volunteers will remain in the Kym's Kids database for record purposes only.

If a student volunteer is not active with the Kym's Kids program for a period of six (6) months, he or she will be automatically withdrawn from the program and will receive a Notice of Ineligibility form indicating their withdrawal.

Standards of Conduct

No student volunteer shall:

1. Authorize the use of or use for the benefit or advantage of any person, the name, emblem, endorsement, services, or property of Kym's Kids.
2. Accept or seek on behalf of any person, any financial advantage or gain offered as a result of the volunteer's affiliation with Kym's Kids.

3. Publicly use any Kym's Kids affiliation in connection with the promotion of partisan politics, religious matters, or positions on any issue not in conformity with the official position of Kym's Kids.
4. Disclose or use any confidential Kym's Kids information that is available solely as a result of the volunteer's affiliation with Kym's Kids to any person not authorized to receive such information, or use to the disadvantage of Kym's Kids any such confidential information, without the expressed authorization of Kym's Kids.
5. Knowingly take any action or make any statement intended to influence the conduct of Kym's Kids in such a way as to confer any financial benefit on any person, corporation, or entity in which the student volunteer has a significant interest or affiliation.
6. Operate or act in a manner that creates a conflict with the interests of Kym's Kids and any organization in which the student volunteer has a personal, business, or financial interest. The student volunteer shall disclose such conflict of interest to the Kym's Kids executive director.

Post-Graduate Scholarship Opportunity

Upon graduating as an ACTIVE PARTICIPANT (successfully completing your 12th grade year and meeting the Kym's Kids minimum requirements for that year), you will be eligible to continue your Kym's Kids Scholarship in college. In order to be a member of the Post-Graduate Program, you must be actively enrolled into a college or university. Throughout **each year** of college (freshman through senior), you must complete the following minimum requirements:

- Maintain a minimum GPA of 2.5 each school year between **August 1 – May 31**
- Complete 40 hours of service between **August 1 – May 31**

(Please sign as requested on the following page)



STUDENT VOLUNTEER

Code of Conduct Certification of Disclosure

I, _____, certify that I have read and understand the Code of Conduct of Kym's Kids of San Antonio and agree to comply with it, as well as with the applicable laws that impact the organization. I understand that if I, or any of my family members, try to contact the Rapiers, that it is a violation of this code of conduct and will result in immediate termination from the Kym's Kids program.

I give permission for an authorized representative from _____ to release my report cards to Kym's Kids Staff each grading period for the purposes of maintaining consistent academic records.

Printed Name (Kym's Kids Student Volunteer)

Printed Name (Kym's Kids Parent/Guardian)

Signed Name (Kym's Kids Student Volunteer)

Signed Name (Kym's Kids Parent/Guardian)

Date

Date

PARENTS/GUARDIANS

Code of Conduct Certification of Disclosure – Parent/Guardian

I, _____, the parent/guardian of _____, have read, understand, support, and agree to comply with the expectations of the Kym's Kids Code of Conduct as well as with the applicable laws that impact the organization. I understand that if I, or any of my family members, try to contact the Rapiers, that it is a violation of this code of conduct and will result in my child's immediate termination from the Kym's Kids program.

Authorization to Release Information from Academic Records

I, _____, the parent/guardian of _____, give permission for an authorized representative from _____ to release my child's report cards to Kym's Kids Staff each grading period for the purposes of maintaining consistent academic records.

Printed Name (First Kym's Kids Parent/Guardian)

Printed Name (Second Kym's Kids Parent/Guardian)

Signed Name (First Kym's Kids Parent/Guardian)

Signed Name (Second Kym's Kids Parent/Guardian)

Date

Date



Informed Consent, Information Release, and Liability Waiver

I. Informed Consent for Program Evaluation

The student volunteer will evaluate the Kym's Kids program. The purpose of the evaluation is to see in which ways Kym's Kids makes a difference in the lives of its participants. We will ask about interests, activities, and opinions, as well as background information about their families. All information will be used only to evaluate our program; no information will be used to evaluate any student volunteer. We will keep this information confidential and will not link it with any other student volunteer name. All information will be reported in the aggregate. Materials will be stored without any names attached. The study may include surveys, interviews (both individual and group), and observations of the student volunteers.

I understand that this study and evaluation are voluntary and that I can request, at any time, to be withdrawn from the study. I consent to take part in the evaluation study of Kym's Kids of San Antonio.

II. Photo and Information Release

I grant permission for Kym's Kids of San Antonio to use any photos, film, digital images, videos, verbal and written statements of the Participant for promotional or other use.

III. Acknowledgment of Risk and Participation Waiver

I understand the risks involved with volunteering with Kym's Kids of San Antonio. I agree to participate in projects, events, and functions related to Kym's Kids. I release Kym's Kids and its partners, volunteers, agents and sponsors (the "Released Parties") from any loss or damage, including death, I may suffer as a result of these activities. My parents also release the Released Parties from any claim or any damages suffered by them as a result of the student volunteer's injury or death from Kym's Kids activities. This includes all claims and liabilities from any activity sponsored by or related to Kym's Kids.

I agree to indemnify and hold harmless the Released Parties from any loss, liability, damage or costs, including court costs and attorneys' fees, that they may incur due to my activities with Kym's Kids, whether caused by the negligence of the Released Parties or otherwise.

If I am a minor, my parent's signature signifies their understanding and agreement with the contents of this document.

Printed Name (Kym's Kids Student Volunteer)

Printed Name (Kym's Kids Parent/Guardian)

Signed Name (Kym's Kids Student Volunteer)

Signed Name (Kym's Kids Parent/Guardian)

Date

Date



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Medical Release and Information

Authorization for Medical Treatment

As the parent/guardian of _____, a student volunteer of Kym's Kids of San Antonio, I hereby give authorization to the Kym's Kids staff to take my child to the emergency room of the nearest hospital should, for any reason, they require any minor medical or surgical treatment and/or medication while participating in a Kym's Kids of San Antonio volunteer event and/or field trip activity. I further authorize the hospital and its medical staff to administer treatment as deemed necessary by them for the well-being of my child. I understand that staff will make attempts to notify me in all medical emergencies and I will be contacted, if possible, for my permission if hospitalization for treatment of a serious nature is required.

- By checking this box, I acknowledge that I have read and understand the above and I freely give my consent and permission of all things contained herein.

Student Volunteer's Medical Information

Allergies: Please list any allergies your child may have including food, insects, animals, medications and plants.

Preventive Measures: Please list any medical information that may be relevant. Include any special circumstances, limitations, or health information that we should know such as dietary restrictions, chronic or recurrent health conditions, reactions and their treatment.

Emergency Contact Information

Primary Contact

Name: _____
Relationship: _____
Home Phone: _____
Cell Phone: _____
Work Phone: _____
Home Address: _____
City: _____ State: _____ Zip: _____

Secondary Contact

Name: _____
Relationship: _____
Home Phone: _____
Cell Phone: _____
Work Phone: _____
Home Address: _____
City: _____ State: _____ Zip: _____

Parent/Guardian Signature

Date