



Thank you for your interest in volunteering with Make-A-Wish® Mid-Atlantic. Our volunteer program is designed to give each volunteer a diverse and rewarding experience while working toward fulfilling our mission: Together, we create life-changing wishes for children with critical illnesses.

HOW DO I BECOME A VOLUNTEER?

In order to provide wish children and their families with the best experience possible, we require all potential volunteers to go through an assessment before becoming an active Make-A-Wish Mid-Atlantic volunteer. After your paperwork is processed, you will be contacted with detailed instructions about next steps based on the opportunities you selected.

WHY DO I NEED A BACKGROUND CHECK?

Due to the nature of our work, select volunteer positions must successfully complete a criminal background check every three 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 questions or address any concerns that you may have. Call us at 301.962.WISH (9474) or email us at volunteer@midatlantic.wish.org.

HOW DO I SUBMIT MY APPLICATION?

Please complete and submit pages 2-5 of this packet to our office via email, mail or fax.

Volunteer references (sent as a separate document) may be submitted with the application or directly from the reference if applicable.

Make-A-Wish Mid-Atlantic
6555 Rock Spring Drive, Suite 280
Bethesda, MD 20817
volunteer@midatlantic.wish.org
Fax: 301.656.2857

PRIVACY & PROTECTION OF INFORMATION

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

Make-A-Wish[®]

MID-ATLANTIC

Volunteer Application

For office use only:	
<input type="checkbox"/>	RE _____
<input type="checkbox"/>	Reference1_____
<input type="checkbox"/>	Reference 2_____
<input type="checkbox"/>	Interview_____
<input type="checkbox"/>	Background check_____

Please note that all volunteer opportunities require completion of this application and a signed Conflict of Interest and Ethics Statement. Volunteers are also required to successfully complete training relevant to the desired opportunity. In addition, select opportunities require a criminal background check performed every three years.

Personal Information:

Title:	Name: <small>First</small>	Middle	Last
Nickname:			
Address: <small>Street</small>		City	State Zip
County (ex: Kent, Fairfax, Wicomico):		Birth Month/Day: I'm over the age of 18: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone: <small>Home</small>	Cell	Preferred Phone: <input type="checkbox"/> Home <input type="checkbox"/> Cell	
Email:			

Employment Information

Employer:	Position:		
Address: <small>Street</small>	City	State	Zip
Work Phone:	May We Contact You at Work? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Would your company be interested in involvement with Make-A-Wish Mid-Atlantic? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Emergency Contact Information

Emergency Contact:	Relationship:
Emergency Contact Phone:	

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

- Professional Certifications/Licenses (i.e. Social Work, Child Life, M. Ed, MPT, OTR, CCC- SLP, Child Care, etc.), please specify: _____
- Construction / Carpentry, please specify: _____
- Interior Decorating
- Photography
- Other: _____

Bilingual: Specify language(s) in which you have fluency (including Sign Language), if applicable.

Language: _____

Fluency level: _____

Notes: _____

Volunteer Opportunities:

Office Volunteer - During normal business hours help with administrative tasks, data entry and special office projects (minimum of 8 hours weekly required).

Special Event Volunteer – Join us for one of Make-A-Wish Mid-Atlantic’s fun events. Events are held throughout the year and across our territory.

Wish Granting Volunteer – Work in teams of two to help make wishes come true. This involves working in collaboration with chapter staff to interview the wish child and family to help discover the wish, helping the child stay engaged while waiting for the wish to happen and planning a wish celebration. Wish granting requires the following:

- Long-term commitment (minimum of two years).
- Administrative and technical focus with paperwork completion and electronic submission
- Constant, timely communication with staff, families and volunteer partners (email and phone)
- Comfort in in-kind donation solicitation

****You will be asked to submit two reference forms in addition to the application at a later date before you are eligible to attend a training.*

Wish Support Volunteer – Volunteers will assist in carrying out wishes to have room re-dos and/or electronic wishes. For room re-dos, support is needed to build furniture, paint walls and complete general cosmetic room changes. If you have experience in interior design, support is needed for designing rooms and layouts. For electronic wishes, support is needed to install and/or set up electronic devices to be prepared for wish child use. Volunteers will be contacted as these opportunities arise.

Please circle which opportunities you are interested in:

Room Re-do Interior Design Electronic Wishes

Other _____

Wish granting volunteers must complete in depth interview summaries as a regular part of their volunteer role. We rely on this information and extensive wish paperwork throughout the wish process to ensure we are granting unique, life changing wishes for each eligible child. Please be detailed and thorough in your responses as they will be used as a writing sample in our evaluation process.

Wish granting volunteers work directly with children between the ages of 2.5 and 18. Please describe your previous experience working, volunteering or caring for children and how those experiences impacted your decision to apply to be a wish-granting volunteer?

What do you find most fulfilling about spending time with children?

Describe potential challenges you anticipate working with children and families facing critical illnesses?

Do you have any experience working with children with developmental delays or other special needs? If so, please describe. Please include any experience with augmentative and alternative (AAC) devices.

Regular Availability: Select and describe regular availability that applies.

Weekday (please list specific regular availability if known): _____

Weekends (regular availability of at least 2 weekends per month to be considered for the wish granter role): _____

Other volunteer commitments (please list known conflicts): _____

Travel/Transportation:

Are you comfortable traveling within the Mid-Atlantic territory to meet the needs of our wish families?

Yes

No, and please describe: _____

Do you have a personal car for travel (please note that Make-A-Wish Mid-Atlantic cannot reimburse for mileage associated with volunteering)?

Yes

No, and please describe how you plan to travel to/from volunteer commitments: _____

Volunteer Commitment: Do you have any future plans that could prohibit you from fulfilling the 2-year commitment to wish granting?

Yes, and please describe: _____

No

Volunteer Commitment: Make-A-Wish policy does not require a wish family to show proof of residency to be eligible for our program. With that being said, we do encounter families who are in the country illegally. All volunteers are bound by a Conflict of Interest & Ethics Assurance Statement. This document states that, "During my involvement with Make-A-Wish Mid-Atlantic and thereafter, I will maintain the confidentiality of any information regarding Make-A-Wish Mid-Atlantic, wish children and their families, donors and volunteers that has not been released publicly, unless legally obligated to do otherwise."

Would this statement affect you in a personal or professional manner?

Yes

No

I affirm that the information I submitted 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 understand the various volunteer roles and am able to perform those roles for which I have 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 Mid-Atlantic.

Signature: _____ Date: _____