

CAIN Volunteer Application

Contact Information	
First Name	Date:
Last Name	
Street Address	
City State Zip	
Home Phone	Cell Phone
Email	Add to CAIN email list? YES NO
Birthday Month and Day	OK to share in Volunteer Newsletter? YES NO

Volunteer Opportunities at CAIN		
Choice Pantry	Mon 5pm–7pm Tues 10am–1pm Thurs 10am–1pm	*Assist Pantry guests by offering hospitality, helping guests select shelf stable food, produce, meat and personal care items. * Assist by receiving donations and stocking shelves as needed.
Back Pantry	Mon 10am-1pm Wed 10am-1pm Fri 10am-1pm	* Assist CAIN Pantry Manager with preparation for pantry sessions, sort and re-stock food, set up produce baskets, and participate in related activities to ensure a positive guest experience.
Committees	One day per month	* Contribute your expertise by participating in the External Affairs, Internal Affairs or Finance committee,

Where would you like to help?	When would you like to help?
<i>Please circle:</i> Choice Pantry Back Pantry Committee	<i>Please circle:</i> Weekly / Monthly Which Day(s)? _____ What Times? _____ Other: _____

Special Skills Volunteer Opportunities: Special Skills that are in need at CAIN that you may have and would be willing to volunteer your time and talent. Please CIRCLE:		
Clerical / Data Entry	Computer "Help Desk" / IT	Database Management
Desktop Publishing	Event Coordination	Facility Management
Fund Development	Grant Development/Writing	Human Resources / Personnel
Language Translation (including Sign Language) Language: _____		
Legal Consulting	Nutritional / Healthy Diet	Pastoral/Spiritual Counseling
Property Maintenance (Electrician, General Cleaning, Lawn Care, Painting, Plumbing, etc.)		
Volunteer Coordination/Recruitment	Other: _____	

Religious/Church Affiliation (if any) _____

Previous Volunteer Experience		
Dates	Location	Position
Person to Notify In Case of Emergency		
Name		Relationship to you
Street Address		
City State Zip		
Home Phone		Cell Phone
Agreement and Signature		
<p>By submitting this application, I affirm that that facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statement, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I will comply with CAIN's background screening process. I have received and agree to follow all of CAIN's volunteer guidelines and operating procedures. I understand that my social security number and date of birth will be destroyed following the completed background check. My records will be kept confidential and my personal information will not be held or shared, except for my birth month and day, listed on the previous page, if I have given consent to share in the monthly volunteer newsletter.</p>		
Name (printed)	/Date	
Signature		
Release		
<p>I hereby release and hold harmless CAIN, and its board, staff, organizer, agencies and agents from any and all losses, claims, expense actions, causes of actions, cost damages and obligations, financial or otherwise, arising from any and all acts and unforeseen contingencies that result in injury to person or damage to property while traveling to, participating in, and departing from CAIN.</p> <p>I agree that CAIN or its agents may photograph or take video footage ("Content") of or including me and/or any minors for whom I am legal guardian. I understand I must alert the photographer/videographer if I do not want my picture taken.</p> <p>I hereby irrevocably grant to CAIN the non-exclusive right to display, publicly perform, exhibit, modify, alter, create derivative works, exploit and otherwise use and permit others to use the Content, including the name and likeness of myself and of any minors for whom I am legal guardian should we appear in the Content, for any lawful purposes in any medium or format now known or devised in the future (including, without limitation, development of mobile, digital, social media and internet-based advertising, marketing and promotional materials), on a perpetual basis, throughout the world, without further consent from or compensation to me and I hereby waive any right I may have to inspect or approve any materials in which the Content is used.</p> <p>I agree that CAIN shall have the exclusive right to copyright the Content or any derivative materials, as the sole owner and author, and to further assign any such rights without consent from me. I agree that I will not: (i) contest CAIN's exclusive copyright and ownership of the Content or any derivative materials, or any other right CAIN may have in the Content or any derivative materials; (ii) claim ownership in any part of the Content or any derivative materials; (iii) not object to the exploitation of any part of the Content or any derivative materials or to any changes to the Content or any derivative materials made by or on behalf of CAIN. I further agree to execute any documents and do any further acts as may be reasonably required by CAIN to support CAIN's rights in the Content or any derivative materials.</p>		
Name (printed)	/Date	
Signature		
If under 18 – you must also have the signature of a parent or guardian:		
Parent/Guardian Name (printed)	/Date	
Parent/Guardian signature		

Please send completed application via email to volunteers@caiministry.org or mail to:
CAIN / Volunteer Coordinator 4230 Hamilton Avenue Cincinnati, OH 45223

Revised April 2019

DISCLOSURE REGARDING BACKGROUND INVESTIGATION

IMPORTANT -- PLEASE READ CAREFULLY BEFORE SIGNING AUTHORIZATION

CAIN ("the Company") may obtain information about you for employment purposes from a third party consumer reporting agency. Thus, you may be the subject of a "consumer report" and/or an "investigative consumer report" which may include information about your character, general reputation, personal characteristics, and/or mode of living, and which can involve personal interviews with sources such as your neighbors, friends, or associates. These reports may contain information regarding your credit history, criminal history, social security verification, motor vehicle records ("driving records"), verification of your education or employment history, or other background checks. Credit history will only be requested where such information is related to the duties and responsibilities of the position for which you are applying. You have the right, upon written request made within a reasonable time after receipt of this notice, to request disclosure of the nature and scope of any investigative consumer report and a copy of any report about you. Please be advised that the nature and scope of the most common form of investigative consumer report obtained with regard to applicants for employment is an investigation into your education and/or employment history conducted by First Advantage Background Services Corp. ("First Advantage"), P.O. Box 105292, Atlanta, GA 30348, 1-800-845-6004. The scope of this notice and authorization is all-encompassing, however, allowing the Company to obtain from any outside organization all manner of consumer reports and investigative consumer reports now and throughout the course of your employment to the extent permitted by law. As a result, you should carefully consider whether to exercise your right to request disclosure of the nature and scope of any investigative consumer report.

ACKNOWLEDGEMENT AND AUTHORIZATION

I acknowledge receipt of the DISCLOSURE REGARDING BACKGROUND INVESTIGATION and A SUMMARY OF YOUR RIGHTS UNDER THE FAIR CREDIT REPORTING ACT and certify that I have read and understand both of these documents. I hereby authorize the obtaining of "consumer reports" and/or "investigative consumer reports" by the Company at any time after receipt of this authorization and throughout by volunteer time, if applicable. To this end, I hereby authorize, without reservation, any law enforcement agency, administrator, state or federal agency, institution, school or university (public or private), information service bureau, employer, or insurance company to furnish any and all background information requested by First Advantage P.O. Box 105292 Atlanta, GA 30348, 1-800-845-6004, another outside organization acting on behalf of the Company, and/or the Company itself. Their Privacy Policy can be reviewed at <http://www.fadv.com/privacy-policy/>. I agree that a facsimile ("fax"), electronic or photographic copy of this Authorization shall be as valid as the original.

SIGNATURE

First Name	Middle Name
Last Name	Date
Signature	

REQUIRED BACKGROUND CHECK INFORMATION

First Name	Middle Name
Last Name	Other Names/Alias
Social Security #	Date of Birth
Driver's License #	Driver's License State
Street Address	Home Phone
City, State, Zip	
Current Employer	
Position	Dates of Employment

THIS SHEET WILL BE DESTROYED FOLLOWING COMPLETION OF YOUR BACKGROUND CHECK.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Below is a summary of your major rights under the FCRA.

For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

You must be told if information in your file has been used against you. Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.

You have the right to know what is in your file. You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:

- a person has taken adverse action against you because of information in your credit report;
- you are the victim of identity theft and place a fraud alert in your file;
- your file contains inaccurate information as a result of fraud;
- you are on public assistance;
- you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies.

See www.consumerfinance.gov/learnmore for additional information.

You have the right to ask for a credit score. Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.

You have the right to dispute incomplete or inaccurate information. If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.

Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information. Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

Consumer reporting agencies may not report outdated negative information. In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.

Access to your file is limited. A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.

You must give your consent for reports to be provided to employers. A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore.

You may limit “prescreened” offers of credit and insurance you get based on information in your credit report. Unsolicited “prescreened” offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-567-8688.

You may seek damages from violators. If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.

Identity theft victims and active duty military personnel have additional rights. For more information, visit www.consumerfinance.gov/learnmore.