

Neighborhood Courts
Volunteer Application
2024

VOLUNTEER APPLICATION

Please fill out the entire application. If you need extra space, please add additional pages and refer to them in your answer. Thank you!

<u>Volunteer General Information</u>		
<u>Name (Full Legal Name):</u>	<u>Name you go by:</u>	<u>Date of Birth</u>
<u>Home Address</u>	<u>City and Zip</u>	
<u>Phone Number – Home</u>	<u>Phone Number – Cell</u>	
<u>Email Address</u>		
<u>Preferred Method of Contact:</u> <input type="checkbox"/> Home <input type="checkbox"/> Cell <input type="checkbox"/> Email		
<u>Place of Employment</u> (if retired or unemployed, please list previous place)		
<u>Position/Title:</u>		
<u>(Only for students) School you attend, area of study, and current year:</u>		
<u>Do you have any special needs requiring accommodation?</u>		
<u>Interests and Hobbies</u>		
<u>Current and/or Previous Community Involvement</u>		
<u>Are you proficient in any other language? Please specify below:</u>		
<input type="checkbox"/> Spanish <input type="checkbox"/> Other: _____		

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Please specify your skill in that language: Read Speak Write
(check all that apply)

Can you hold a conversation in that language?

Neighborhood Courts

How did you hear about the program?

Why would you like to participate in the program?

What does accountability mean to you?

Describe any skills/strengths/qualities you have that would make you a good NHC volunteer:

What would you like to gain or learn by being a NHC volunteer?

What (if any) experience do you have with the criminal justice system?

Have you ever had any experiences or contacts with a law enforcement agency or the court system (positive or negative)? If so, please explain:

Have you been a victim of crime? Yes No

If comfortable, please explain:

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References and Emergency Contacts

Please list two contacts familiar with your work ethic and capabilities (no relatives please)

Name:	Phone Number:	Relationship to you:
Name:	Phone Number:	Relationship to you:
<u>Emergency Contact</u> Name:	Phone Number:	Relationship to you:

Volunteer Time Commitment

PLEASE READ

The following training dates and times are **MANDATORY**. If you are unable to make any one of these training dates and times, please notify the email below to see if accommodation can be made.

- Training Dates (Locations TBD)**
- Monday October 21, 2024 - 5:30 p.m. - 8:30 p.m. (in-person)**
 - Wednesday October 23, 2024 - 5:30 p.m. - 8:30 p.m.**
 - Monday October 28, 2024 - 5:30 p.m. - 8:30 p.m.**
 - Saturday November 2, 2024– 10:00 a.m. - 5:00 p.m. (in-person)**
 - Monday November 4, 2024 - 5:30 p.m. - 7:30 p.m.**

In addition, conferences typically run for about 2 hours and are currently scheduled for Tuesday evenings, Wednesday afternoons, and Thursday afternoons. Volunteers will be asked to be present for approximately 1-2 conferences a month, allowing flexibility within their schedule. Volunteers will also be asked to participate in a monthly volunteer meeting, scheduled for 1 hour on the last Thursday evening of each month.

I have read the above section regarding mandatory volunteer training and expected conference times.

By signing and submitting your application, you confirm your commitment to attend the scheduled training dates and times and that you will be available during the above-listed conference days.

Check this box if you need to send an accommodation request. Please send the request to: neighborhoodcourts@santacruzcountyca.gov, and in the Subject Line, put your: Name, Date of application, and Accommodation Request

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Please indicate your conference availability by checking the corresponding times and provide any specific information you believe we should know about your availability to volunteer.

Mornings Afternoons Evenings

Notes:

Certification

I hereby certify that the information provided above in this application is true and correct. My signature authorizes the District Attorney's Office to contact my references.

Signature of Applicant

Date of Signature

Please return completed application via email to:
neighborhoodcourts@santacruzcountyca.gov

-or-

by mailing or dropping off a copy to:
Neighborhood Courts
ATTN: Monica Carrillo
Santa Cruz County District Attorney's Office
701 Ocean Street. Room 200 • Santa Cruz, CA 95060
831-454-2534

If you have any questions, please contact:

Monica Carrillo
neighborhoodcourts@santacruzcountyca.gov
(o) 831-454-2534 | (c) 831-535-9356

Danitza (Dany) Torres
danitza.torres@santacruzcountyca.gov
(o) 831-454-3588 | (c) 831-566-7051