



## Volunteer Crisis Response Advocate Application

### PERSONAL HISTORY

Full name: Last, First, Middle \_\_\_\_\_ Social Security Number \_\_\_\_\_

Pronouns: \_\_\_\_\_

Date of birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Place of birth: \_\_\_\_\_  
 Month, Day, Year City, State/Country

Permanent (Home) Address: \_\_\_\_\_  
 (Street, City, State, Zip Code)

How long have you resided at your Permanent Address? \_\_\_\_\_

Campus or Local Address (if different from above):

\_\_\_\_\_  
 \_\_\_\_\_  
 (Street, City, State, Zip Code or Residence Hall)

Cell Phone #: (\_\_\_\_)\_\_\_\_-\_\_\_\_\_

Email address: \_\_\_\_\_

School or College: \_\_\_\_\_ Expected Graduation Date: \_\_\_\_\_

If Faculty or Staff, list Department: \_\_\_\_\_

### EDUCATIONAL DATA

Faculty, Staff or Graduate Students: List colleges/universities attended. Include name of school, location, dates attended, course pursued, date graduated, degrees or diplomas.

\_\_\_\_\_  
 \_\_\_\_\_

What professional license(s) do you possess?

\_\_\_\_\_

List your proficiency in any foreign language as "slight", "good", "fluent":

LANGUAGE	SPEAK	UNDERSTAND	READ	WRITE
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**Please acknowledge the following requirements by signing your initials next to each one.**

- \_\_\_\_ 18 years of age or older
- \_\_\_\_ Access to a car
- \_\_\_\_ No criminal history
- \_\_\_\_ No prior history as a defendant in a violence related matter
- \_\_\_\_ Have an active cell phone
- \_\_\_\_ Volunteering requires me to be within
- \_\_\_\_ Volunteer shifts are whenever the office is closed, which is overnight evenings, weekends, and when the university is closed. I acknowledge volunteering would be during those times.

### **COURT RECORD**

Have you ever been convicted of violating any law since age 18?

YES \_\_\_\_ NO \_\_\_\_ If "yes", give date, place, charge, disposition and details:

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### **REASON FOR APPLYING FOR VOLUNTEERING**

What, if any, has been your experience in Sexual Assault and Domestic Violence?

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(Use an additional sheet if necessary.)

Please explain your reasons for applying as a volunteer to the Rutgers University Sexual Assault and Domestic Violence Response Team.

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(Use an additional sheet if necessary.)

I understand that any appointment tendered me will be contingent upon the results of my criminal and judicial background checks and successful completion of training. I am aware that willfully withholding information or making false statements on this application will be the basis for dismissal as a Crisis Response Advocate. I agree to these conditions and I hereby certify that all statements made by me on this application are true and complete, to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

Please return to Rebecca Vazquez ([Rebecca.vazquez@rutgers.edu](mailto:Rebecca.vazquez@rutgers.edu))  
You will be contacted via email if there are any questions about the application and with any information about upcoming trainings.