



## Court Ordered Community Service Application

Thank you for expressing interest in fulfilling your community service hour requirements at Spread the Word Nevada! We are looking for volunteers who are compassionate, diligent, dependable and dedicated to advancing childhood literacy in our community.

In order for your request to be considered, you must complete this application in full and send it to the Volunteer Engagement Manager Lovely Mempin at [lovely@spreadthewordnevada.org](mailto:lovely@spreadthewordnevada.org).

**We do not accept the following:**

- Court appointed community service for any felony offenses including but not limited to theft, drug possession, assault/battery, larceny, offences against children or weapons related charges.
- Walk ins – all individuals needing to complete court appointed community service must fill out an application and gain approval before starting any volunteer work. It takes approximately a week to fully process a request.

Below is information on available volunteer opportunities at Spread the Word Nevada.

- **Warehouse Volunteer** – tasks include sorting, scanning, boxing, cleaning and prepping books to be distributed to our four literacy programs. This activity is only available during office hours *Monday through Friday from 9:00 am to 3:00 pm – no weekends or evenings.*

Note: Completing and submitting an application does not guarantee placement in our volunteer program. Spread the Word Nevada also reserves the right to deny any potential volunteer or terminate any existing volunteer for any reason at any time. If accepted, you are responsible for notifying the STWN Volunteer Manager of any forms, letters, signatures or paperwork you need for your community service.

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Name: \_\_\_\_\_  Male  Female

Address: \_\_\_\_\_ Apt./Unit# \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

How long have you been at this address? \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

How did you hear about Spread the Word Nevada? \_\_\_\_\_

Are you currently working?  Yes  No

If yes, where: \_\_\_\_\_ What is your position? \_\_\_\_\_

Name of supervisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

How long have you been working at this location? \_\_\_\_\_

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**Emergency Contact**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alt. Phone#: \_\_\_\_\_

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**Criminal Background**

Spread the Word Nevada may consider the nature, date & circumstances of an offense, as well as whether the offense is relevant to the duties of the position applied for.

Have you ever been convicted for a crime?  Yes  No

Are you currently out on bail, the subject of a current warrant for arrest or released on your own recognizance pending trial?  Yes  No

If yes to either of the above questions, please briefly describe the nature of the crime(s), date and place of conviction and the legal disposition of the case:

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What are you being charged with that requires you to obtain community service hours? List ALL charges.

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How many hours do you need? \_\_\_\_\_ Date hours must be completed by: \_\_\_\_\_

\*\*\*Note: It is your responsibility to notify the Volunteer Manager at least one week prior if a letter verifying completion of these hours is required.

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Please list the name and contact information of your probation officer / case handler / counselor / referring agency:

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

If you are under 18 years of age, please provide the name and contact information of your parent or legal guardian:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Employer/Business: \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

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### **Volunteer Agreement & Authorization**

I understand the importance of this volunteer commitment and have answered the application questions honestly and to the best of my knowledge. I understand that falsified information on this application shall be grounds for immediate dismissal from the volunteer program. I give Spread the Word Nevada permission to verify the information I have provided in this application. Furthermore, as a volunteer for Spread the Word Nevada, I – the undersigned – exempt and relieve Spread the Word Nevada and their directors, trustees, employees and staff from liability for personal injury, property damage or wrongful death caused by negligence. I understand that Spread the Word Nevada does not require my participation as a volunteer. I hereby release and discharge Spread the Word Nevada and their directors, trustees, employees and staff from all claims and liability including those from negligence arising from my participation as a volunteer. I further agree to hold harmless and indemnify Spread the Word Nevada and its agents for all defense costs, including attorney’s fees, and any other costs resulting in connection with my participation as a volunteer for Spread the Word Nevada. I understand my role as a volunteer at Spread the Word Nevada. I understand to follow their guidelines, policies and procedures as presented to me in the training. If I do not follow these guidelines, my volunteer service will end.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

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**Applicants under the age of 18 years old must have the following section completed by a parent or legal guardian:**

I, \_\_\_\_\_, testify to Spread the Word Nevada that I am the parent/legal guardian of the applicant whose signature appears above. I have read and understand the above Volunteer Agreement & Authorization and hereby give my consent and permission for my child to participate as a volunteer for Spread the Word Nevada. On behalf of the above applicant, I agree and accept all of the provisions of the foregoing Volunteer Agreement & Authorization.

**Parent/Guardian Signature** \_\_\_\_\_ **Date** \_\_\_\_\_