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TO BE COMPLETED BY TRI-CITY	
Date application reviewed: _____	
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied

Volunteer Application

Which programs are you interested in volunteering? *(Check all that applies)*

<input type="checkbox"/> Wellness Center <input type="checkbox"/> Community Navigators <input type="checkbox"/> Therapeutic Community Gardening (TCG) <input type="checkbox"/> Peer Counseling – TAY (Transitional Age Youth) Ages 16-25 <input type="checkbox"/> Adults Ages 26-59 <input type="checkbox"/> Senior Ages 60+

We consider applicants for all positions without regard to race, color, religion, sex, national origin, age, marital or veteran status, the presence of a non-job-related medical condition or disability, or any other legally protected status.

PLEASE PRINT ALL INFORMATION

E-Mail Address: _____

Last Name: _____ **First:** _____ **Middle:** _____

Address: _____ **City:** _____ **Zip:** _____

Phone/Home: _____ **Cell:** _____

Can you perform the essential functions of the position applied for?
 without assistance
 with assistance

NOTE: Tri-City Mental Health Services requires that volunteers be 18 years-of-age or older.

EDUCATION

High School Attended: _____ Location: _____ Graduate? **Yes** **No**

Junior College: _____ Location: _____ Graduate? **Yes** **No**

College/University: _____ Location: _____ Graduate? **Yes** **No**

Graduate School: _____ Location: _____ Graduate? **Yes** **No**

Degree(s) held: Associate Bachelors Masters Doctorate Field(s): _____

Professional License held: _____ License Number: _____ Expires on: _____

PERSONAL

Primary Language: _____ Read Write Speak

Military Service Branch: _____ Specialty: _____

Computer hardware/software skills: _____

Other special skills/accomplishments/languages: _____

REFERENCES Include technical/professional, supervisors, friends, relatives or co-workers.

1. Name: _____ Phone: (_____) _____

Address: _____

2. Name: _____ Phone: (_____) _____

Address: _____

3. Name: _____ Phone: (_____) _____

Address: _____

EMPLOYMENT/VOLUNTEER HISTORY Begin with your current or most recent employer:

Employer: _____ Dates From: _____ To: _____

Address: _____ Phone:(_____) _____

Responsibilities: _____

Employer: _____ Dates From: _____ To: _____

Address: _____ Phone:(_____) _____

Responsibilities: _____

Employer: _____ Dates From: _____ To: _____

Address: _____ Phone:(_____) _____

Responsibilities: _____

Employer: _____ Dates From: _____ To: _____

Address: _____ Phone:(_____) _____

Responsibilities: _____

OTHER

Please attach any other information that would be helpful to us in considering your application.

Have any of your relatives ever worked at Tri-City Mental Health Services? Yes No

Name(s): _____

STATEMENT OF UNDERSTANDING

Please read – Signature required

*I understand that training slots are limited and therefore submission of this application does not guarantee admission .

*I understand that this is a **volunteer program** and I will not be a paid employee of Tri-City Mental Health Center.

Signature

Date

ACKNOWLEDGEMENT

I certify that all statements in this application are true and complete to the best of my knowledge. I authorize Tri-City Mental Health Services to make any inquiries to determine my suitability for volunteering and do a background check which may include fingerprinting. I understand that any misrepresentation made or unsatisfactory reference may be cause for rejection of this application.

Applicant Signature: _____ **Date:** _____

Volunteer Opportunities *(Descriptions)*

Wellness Center

The Wellness Center is a hub of community activities that promote recovery, resiliency, and wellness for people confronting mental health issues. Staff located at this site, including peer advocates, family members, clinical staff, and others, provides a range of culturally competent, person- and family-centered groups, workshops and socialization activities designed to promote increasing independence and wellness for people of all ages.

Peer Mentor

The Peer Mentor Program is available to TAY (Transitional-Aged Youth) ages 16-25, adults ages 26-59 and older adults within the Tri-City service area. Volunteer mentors receive specialized training and on-going weekly supervision and support from TCMHC clinical staff members. These volunteers meet individually with mentees and/or in groups to provide support. Groups focus on providing support and creating opportunities for members to engage in projects that serve their communities and other wellness activities.

Community Navigators

Tri-City's Community Navigator Program consists of highly trained individuals who specialize in linkage and referral to local resources. This mission critical program has been structured for the purpose of helping people gain access to the services and support they need, both formal and informal. Community navigators regularly visit the following settings (among others):

- Community Organizations
- Law enforcement agencies
- Schools
- Courts
- Local NAMI Chapter
- Emerging and well established health and mental health programs
- Residential facilities
- Self-help groups
- Client advocacy groups

Therapeutic Community Gardening (TCG):

Horticulture therapy is the process of using plants, gardening, and the innate closeness humans feel towards nature as direct tools of intervention in programs of therapy and rehabilitation. Although horticulture therapy is regarded as a still emerging mental health treatment model, its usage and practice in early forms can be traced as far back as the times of ancient Egypt. During weekly program groups, TCG clients are allowed the opportunity to plant, maintain, and harvest fruits, vegetables, flowers, and other crops for therapeutic purposes and symptom management. Through group gardening exercises as well as team discussions / activities, TCG clients also have the opportunity to engage with peers and develop positive social relationships with others in the community. Other program activities include cooking classes (centred on meal preparation with harvested crops), games, field trips, and horticulture workshops.