



# Our Daily Bread Food Pantry

## Volunteer Application (Please print)

### \* Required Fields

\*Date: \_\_\_\_\_

\*Name: \_\_\_\_\_

\*Local Address: \_\_\_\_\_  
Street City State Zip Code

\*Phone Number: \_\_\_\_/\_\_\_\_/\_\_\_\_ \*Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

\*Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

\*Emergency Contact Phone Number: \_\_\_\_/\_\_\_\_/\_\_\_\_

\*Pantry tasks/skills you are interested in? (Circle all that apply)

Admin Assistance, Computer Work, Food Procurement, Food Transportation (if yes, do you have an auto insurance policy? \_\_\_Yes \_\_\_No) Fundraising, Grant Writing, Heavy Lifting (50+lbs) I/T, Manual Labor, Mobile/Outreach Pantries (Wednesday/Thursday/Friday afternoon/evening Bi-lingual preferred) Prayer, Shelving

Feel free to add other areas of interest, skills or experience which may benefit Our Daily Bread Food Pantry.

\_\_\_\_\_

\*Months in the area: (Pls circle) Jan Feb Mar Apr May June July Aug Sept Oct Nov Dec or ALL

How did you hear about the Food Pantry? \_\_\_\_\_

Do you have any prior Food Pantry related experience? When and where? \_\_\_\_\_

\_\_\_\_\_

Primary language? \_\_\_\_\_ Do you speak any other languages? Is yes, what are they?  
(Pls circle) English Spanish Creole Other: \_\_\_\_\_

\*What is your organization or church affiliation? \_\_\_\_\_

Are you here for Community Service hours, what organization? \_\_\_\_\_

\*Any pattern/circumstance that will make it inappropriate to serve with minors or that will Compromise the integrity of Our Daily Bread Food Pantry? No \_\_\_Yes \_\_\_

Initials: \_\_\_\_\_

Over

# Volunteer Confidentiality Agreement

- I. **The Parties.** This Volunteer Non-Disclosure Agreement, referred to as the “Agreement”, made \_\_\_\_\_(date) applies to \_\_\_\_\_(Volunteer) associated with and/or the involved in the activities or affairs of **Our Daily Bread Food Pantry (ODBFP)**, with a mailing address of 1450 Winterberry Drive, Marco Island, FL 34145.
  
- II. **Confidential Information.** All data, materials, knowledge, and proprietary information generated through, originating from, or having to do with ODBFP or persons associated with its activities, including contractors, is to be considered Confidential Information and is not to be disclosed to any outside party. This includes, but is not limited to, documents, information, designs, printed matter, policies, procedures, financial data, conversations, messages (received or transmitted), resources, contacts, e-mail lists, e-mail messages, donors, whether internal between staff or outside ODBFP is confidential and the sole property of ODBFP.
  
- III. **Clients** (also referred to as Guests & Donors). Client information, including all file information, is not to be disclosed to any third party, under any circumstance, without the written consent of the Guests or Donors and a member of the ODBFP Board.
  
- IV. **Damages.** Any disclosure, misuse, copying, or transmitting of any material, data or information, whether intentional or unintentional, will subject the Volunteer to potential disciplinary action, prosecution, and/or monetary damages according to the procedures set up by ODBFP and any applicable laws.

The signature of the Volunteer below acknowledges his/her agreement to the aforementioned terms.

Volunteer’s Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name: \_\_\_\_\_

**I agree to the following conditions:**

- All information on this application is open for discussion with Our Daily Bread Food Pantry Leadership Team
- I agree not to sue or engage in any type of legal action affecting Our Daily Bread Food Pantry, not subpoena anyone regarding this information, meetings, notes or records.
- Any and all information will be kept confidential and only be used with Our Daily Bread Food Pantry Leadership Team

Volunteer gives permission to Our Daily Bread Food Pantry to use their personal information in the FBM data base. Volunteer further testifies that all information given on this Volunteer Form is true and complete to the best of their knowledge.

**Photo Consent**

I agree to allow Our Daily Bread Food Pantry unrestricted use of photographs taken of me and/or my family in the course of participation in activities sponsored by Our Daily Bread Food Pantry. I understand that Our Daily Bread Food Pantry intends to use such photographs only in connection with official Our Daily Bread Food Pantry publications and documents.

**Non-discrimination Policy and Procedures**

The following document contains five sections:

- Our Daily Food Pantry Non-discrimination Policy
- How we communicate our policy
- Individual rights
- How we process non-discrimination complaints
- What corrective action we take

**Non-discrimination Policy:**

As a partner agency of the Harry Chapin Food Bank (HCFB) we adhere to several Contract requirements. A key component of these requirements is our non-discrimination policy.

"In accordance with Federal law and our contract with the Harry Chapin Food Bank, we will not discriminate on the basis of race, sex, age, color, national origins, disability, sexual orientation or religion."

**Communicating our Policy:**

We ensure our clients, employees, volunteers, and HCFB are aware of our non-discrimination policy through several means:

- We agree in writing with HCFB not to discriminate.
- Volunteers are advised of our policy.
- Any flyers we develop for the public includes our non-discrimination policy.
- Any website we have has our non-discrimination policy on it.

**Individual Rights:**

Our policy creates certain rights for any individual who believes he/she has been discriminated against. An individual can file a complaint to several state and federal organizations, as well as with the Harry Chapin Food Bank. A complaint may also her made to any of our volunteers verbally or in writing.

**Initials:** \_\_\_\_\_

(Continued)

**Processing Non-discrimination Complaints:**

1. Complaint is received by Our Daily Bread Food Pantry either verbally or in writing.
2. If verbal, we will work with individual to complete our complaint form, to gather appropriate data, to establish a clear understanding of the allegation and to advise him or her of the next steps in the review process.
3. If the individual has already completed our form we will review the data for completeness and clarity.
4. The completed form will be promptly forwarded to the Pantry Team Leader who will review and send to HCFB (Harry Chapin Food Bank) Agency Relations Manager who, as appropriate, will engage the HCFB's Executive Director.
5. The HCFB Agency Relations Manager or Executive Director will assign an individual to review the complaint, who will, as appropriate for the situation, independently gather data about the specific situation.
6. Based on an analysis of the information a determination will be made by HCFB as to whether discrimination, as defined by Federal law has occurred.
7. An appropriate specific solution will be defined for the complaint at hand and correction actions steps will be devised to help preclude repetition by Our Daily Bread Food Pantry.
8. HCFB will notify the individual of the outcome within a reasonable timeframe.
9. HCFB will notify Our Daily Bread Food Pantry of the outcome and any needed corrective action they must take.
10. Our Daily Bread Food Pantry will take corrective action as defined.

**What Corrective Action will Our Daily Bread Food Pantry will take?**

One of our primary objectives in having a clear resolution to a discrimination complaint is to gain a thorough understanding of not only what occurred but why. Based on the findings of HCFB we will undertake appropriate corrective action to help minimize the likelihood or recurrence of discrimination.

While the specific actions cannot be defined before discrimination occurs, corrective actions include activities such as re-training volunteers and one-on-one discussions/ counseling with particular volunteers about the importance of not discriminating and ensuring a clear understanding of what discrimination is.

As a Volunteer applicant of Our Daily Bread Food Pantry, I have provided accurate information, read and understand the non- discrimination policy.

Print your Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail (P.O. Box 109, Marco Island, FL 34146) or drop off signed application and non-discrimination form at 1450 Winterberry Drive, Marco Island, FL 34145

File name: Volunteer Application, Non-disclosure, Non-discrimination V5 11-15-2021