

SATURDAYS OF SERVICE

Fall 2017

“Homelessness, Hunger, and Mental Health:
A Chiz’s Heart Street Intensive”



Dates of Program: Friday, October 20 5-9pm
Saturdays, October 21, November 11, December 2 8am-5pm

Application:

- **Deadline to apply: Friday, September 22 by 4 p.m.**
- Applications are available at www.newpaltz.edu/careers
- Please return applications to the Career Resource Center, HUM 105.
- Candidates may be contacted to set up an interview for the end of September.

Application materials required: *(Incomplete or late applications will not be considered)*

- application form (attached on page 2)
- medical release, photo release, and liability waiver form (page 3)
- typed responses to application questions (see page 4)
- copy of your unofficial transcript; available at my.newpaltz
- copy of your unofficial co-curricular transcript (if available)
- resume outlining previous work, volunteer, and leadership experience
- name, company, job title, and contact phone number for one reference (teacher, faculty member, employer, or supervisor)

Location of Program: Volunteering throughout the day with Chiz’s Heart Street in Kingston, NY

Transportation: Transportation for all Saturdays of Service programming will be provided to and from campus.

Meals: The cost of dinner on Friday will be covered by the program. Breakfast and lunch for Saturdays will be the responsibility of each participant.

Event Details: Up to 18 students will be selected to participate through a competitive application and interview process. Open to full-time, matriculated, undergraduate students at SUNY New Paltz in good academic standing who have not previously participated in Saturdays of Service or Alternative Spring Break. By submitting this application, you give the program coordinator permission to check your judicial and academic records. A failure to uphold these standards at any time may result in discontinuation of the program. Participants are required to attend all dates listed and any unexcused absence will result in discontinuation of the program. The Saturdays of Service Program is free for students and all costs related to transportation, meals (noted above), service materials, and t-shirt will be covered for the duration of the program.

Saturdays of Service
Fall 2017 Application Form

Name _____

Preferred Name _____

Preferred Pronouns _____

New Paltz ID# N0 _____

Local Address _____

Phone Number _____

Preferred Email _____

Class Year _____

Major _____

Hometown _____

T-shirt Size _____

Special needs or accommodations (disabilities, physical limitations, allergies, etc.)

Meal preferences or food allergies

Emergency Contact Information

Name _____

Relationship _____ Phone _____

List any medical information that may be helpful in the event of an emergency:
(i.e. medications, medical conditions, allergies etc.)

By submitting this application, I give the selection committee my permission to verify my G.P.A. and disciplinary record status and to contact the reference listed in this application. I hereby affirm and declare that all information provided on this application is true and accurate.

Applicant's Signature

Date



Fall 2017
Saturdays of Service

MEDICAL RELEASE, PHOTORELEASE,
& LIABILITY WAIVER FORM

*ALL PARTICIPANTS MUST RETURN THIS FORM WITH THEIR APPLICATION! *

Voluntary - My participation in Saturdays of Service (SoS) is voluntary. I selected the activities in which I will participate throughout the semester. I will choose to participate within my physical capacities of which I am fully aware.

Assumption of Risk - I acknowledge that any and all risks associated with work during SoS are voluntarily assumed. I realize that there are several ways that I could potentially hurt myself if I am not careful or choose a task that I am not capable of doing. For example, I could: (a) receive cuts and abrasions or (b) suffer serious bodily injury, even death.

Waiver - I release the State University of New York, the College at New Paltz, the sponsors, organizers, volunteers, and site property owners (as well as all of their affiliates, directors, officers, trustees, employees, representatives, or agents) from all actions or claims or liabilities of any kind that relate to my participation in SoS even though that liability may arise out of negligence or carelessness of any such party. I understand and acknowledge that this waiver binds my heirs, administrators, executors, personal representatives, and assigns.

Hold Harmless - I hold the State University of New York, the College at New Paltz, the sponsors, organizers, volunteers, and site owners harmless and will indemnify them against all actions or claims (including reasonable attorneys' fees, judgments and costs) with respect to any injuries, death, or other damages or losses, resulting from my participation in the program.

Medical Treatment - If I am injured during SoS, it is my responsibility to inform the organizers of SoS and to seek appropriate medical care. Should I require transport to a medical facility as a result of an injury, I am financially responsible for such transportation and medical treatment costs.

Promotion - I hereby grant permission for my name, image, likeness, and voice to be used by the State University of New York at New Paltz, the Career Resource Center, any of the Co-Sponsors, and/or SoS Organizers for any legitimate purpose in any media or promotional materials now or hereinafter developed.

I UNDERSTAND AND AGREE WITH THE CONTENTS OF THIS DOCUMENT. ANY QUESTIONS I MAY HAVE HAD ABOUT THIS DOCUMENT WERE ANSWERED TO MY SATISFACTION.

Participant's Printed Name _____

Signature _____

If under 18, parent or guardian signature _____

Date: _____

Address: _____

City, Zip Code: _____

Email: _____

Phone: _____

Emergency Contact Name & Phone: _____

Saturdays of Service Fall 2017

Application Questions

On a separate sheet of paper, please answer the following questions *thoughtfully and in detail* and hand them in with your application. Please type all of your answers.

1. What motivated you to apply for the SUNY New Paltz Saturdays of Service program?
2. What do you hope to gain from this experience?
3. What can you contribute to this program?
4. Please share any knowledge you have about the social issues impacting the Mid-Hudson Valley. What are some of these? How are they connected? What can volunteers do to make an impact?
5. Please describe what kind of groups/teams you are/have been a part of and your role in those groups.
6. Describe your extracurricular interests, hobbies, and involvement on-campus and off-campus.
7. Have you participated in community service/volunteerism in the past? If so: (1) list the organizations (2) would you volunteer there again? (3) why?
8. If you had one free day to do *anything* in New Paltz, what would you do and why?
9. Please share two “fun facts” about yourself (be creative and have fun!)