



Thank you for your interest in volunteering with Make-A-Wish®. Behind every Make-A-Wish experience, there are volunteers filling a multitude of roles. Their commitment is what drives Make-A-Wish and allows us to create life-changing wishes for children with critical illnesses.

HOW DO I BECOME A VOLUNTEER?

To provide the best experience possible, we require all potential volunteers to go undergo an assessment to determine the best fit for their skills.

Volunteer paperwork takes about 2 weeks to process and approve. Please contact the chapter office if you have any questions regarding our volunteer process. Please note, volunteer needs may vary by chapter.

WHO DO I CONTACT WITH QUESTIONS?

Our team is happy to answer any questions or address any concerns that you may have.

- **Volunteer Outreach Manager:** Will Phelps, (808) 537-3118 or wphelps@hawaii.wish.org
- **Make-A-Wish:** (808) 537-3118 or hawaii.wish.org

HOW DO I SUBMIT MY APPLICATION?

Please complete and submit pages 2-3 of this packet to our office via fax, email or mail.

Make-A-Wish Hawaii
Attn: **Volunteer Services**
P.O. Box 1877, Honolulu, HI 96805
outreach@hawaii.wish.org
Fax # 808-536-5566

PRIVACY & PROTECTION OF INFORMATION

Security of information is extremely important to us. All information submitted is available to and accessed by only relevant personnel. Information is never sold or shared outside of Make-A-Wish.



Youth Volunteer Application

Personal Information

Title:	Name: First	Middle	Last
Nickname:			
Address: Street		City	State Zip
County:		Birth Month:	Day:
		I'm over the age of 18: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Phone: Home	Mobile	Preferred Phone: <input type="checkbox"/> Home <input type="checkbox"/> Mobile	
Email:			

School Information

School Name:	Grade Level:		
Address: Street	City	State	Zip
School Phone:	Do you have a full school day? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Emergency Contact Information

Emergency Contact:	Relationship:
Emergency Contact Phone:	

How did you hear about Make-A-Wish?

- Aware of a wish family who experienced a wish: _____
- Civic organization: _____
- Family: _____
- Friend: _____
- Media/Public Relations: _____
- School: _____
- Other: _____

In a few words, describe yourself and what motivated you to volunteer with Make-A-Wish.

Volunteer Opportunities (select all that interest you):

- Community Outreach – Speak at local community, school, business or civic events increasing awareness and support for Make-A-Wish while educating audiences about our mission. Share Make-A-Wish stories and mission on social media.

- Kids For Wish Kids – Host a fundraiser on your own or with some classmates. You are in charge of planning, organizing, and carrying out the fundraiser.

- Special Events – Opportunities may include one listed below or others, as needed.
 - Macy’s Believe Campaign – Individually, or organize a group to, write letters to contribute to the campaign. Promote the campaign at schools, clubs and on social media.

 - Jingle Rock Run – Assist with pre-walk preparation, set-up, day of walk experience or help with clean-up afterwards. Organize a group to volunteer as walk monitors/cheerleaders or run a station for kids’ areas.

 - World Wish Day – Help celebrate our volunteers and donors by sharing Make-A-Wish stories via social media, hosting a fundraiser or volunteering at World Wish Day events.

- Student Group Member – Be part of an organized group that supports Make-A-Wish through volunteering, fundraising and awareness, while gaining leadership experience.

- Wish Enhancement Advisors – Help add to a child’s wish by making the wish experience special through enhancements and assisting in the planning process.

I affirm that the information I have given on this form is true and correct. The information that I have provided may be verified by contacting persons or organizations named in this application, or by contacting any person or organization that may have information concerning me.

I have read and understood the various volunteer roles and am able to perform those roles in which I have applied for. I am volunteering my time for personal reasons and understand I will not be paid for my services as a volunteer and I expect no compensation.

Parent/Guardian Signature: _____ **Date:** _____

Student Signature: _____ **Date:** _____

*Thanks for taking the time to complete this application.
Once we have reviewed your information, we will be in touch to discuss next steps.
If you need anything in the meantime, please contact:
Will Phelps, Volunteer Outreach Manager 808-537-3118 x132 wphelps@hawaii.wish.org*



**ANNUAL CONFLICT OF INTEREST AND
ETHICS ASSURANCE STATEMENT**

As an employee or volunteer of the Make-A-Wish Foundation (the "Foundation"), I have an obligation to the Foundation and the constituencies it serves to comply with the highest standards of ethical conduct. I will not commit acts contrary to those standards, and I will promptly report to appropriate Foundation representatives – either directly, or through MySafeWorkplace (a 24-hour confidential whistle-blower hotline that can be accessed at www.MySafeWorkplace.com or by calling 1-800-461-9330) – the commission of any such acts by others within the Foundation. I understand that my responsibilities include the following:

Ethics and Legal Assurance

- I will at all times: (a) perform my duties in accordance with relevant laws, regulations and Foundation policies and standards; (b) promote the attainment of the Foundation's legitimate and ethical objectives; and (c) represent the interests of all constituencies served by the Foundation and not favor special interests inside or outside the Foundation in connection with Foundation business.
- I will refrain from: (a) violating any criminal or civil law or regulation, the violation of which may reflect poorly on the Foundation; and/or (b) engaging in or supporting any activity that would discredit the Foundation.
- I will submit to a criminal background check every three years (or more frequently if required by the Foundation), and I agree to disclose at the time I execute this document and thereafter as the same may arise any official investigations of criminal activities, arrests and/or convictions involving me (other than for routine traffic offenses not involving drugs or alcohol).

Conflict Of Interest

- I will either avoid, or will promptly disclose and recuse myself from any decisions involving, any activity or practice which conflicts with, or can be perceived as conflicting with, the interests of the Foundation, including but not limited to situations where I, or a relative, friend or business acquaintance of mine, proposes to provide goods or services to the Foundation for consideration.
- I will refrain from using Foundation property or resources for personal profit or advantage, or for any purpose not related to the activities of the Foundation.
- I will refuse any personal gifts, loans, favors or other consideration of more than nominal value from any Foundation vendor, sponsor or other outside party that would influence, or could be perceived as influencing, my actions or the actions of others.

Confidentiality

- During my involvement with the Foundation and thereafter, I will maintain the confidentiality of any information regarding the Foundation, wish children and their families, donors and volunteers that has not been released publicly, unless legally obligated to do otherwise.
- I will refrain from using or appearing to use confidential information acquired in the course of my service for unethical or illegal advantage, either personally or through third parties.

I have read, understand and agree to be bound by the above standards.

Print name Signature Date