

### Internship/Volunteer Application Form

Please complete this application and attach any additional documents you wish to share ( ie. resume, school requirements). E-mail your materials to Anne Slease, Director of Advocacy and Education at [aslease@namide.org](mailto:aslease@namide.org). Please note INTERN or VOLUNTEER APPLICATION in the subject line.

Upon review of your application, you will be contacted via email regarding next steps.

Volunteer applications are accepted year round and we will get back to you as soon as possible.

Internship applications are accepted year round, however, please note the following due dates:

- **January 8, 2018 for SPRING**                      Interviews and on-boarding will begin the week of January 22, 2018
- **April 30, 2018 for SUMMER**                      Interviews and on-boarding will begin the week of May 14, 2018
- **August 6, 2018 for FALL**                              Interviews and on-boarding will begin the week of August 20, 2018

If applying as an Intern, please indicate the Internship Term for which you are applying:

FALL 20\_\_-20\_\_     SPRING, 20\_\_     SUMMER, 20\_\_     OTHER (please specify) \_\_\_\_\_

**Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**Mailing Address (including zip code)** \_\_\_\_\_

**Campus Address (if different/if applies)** \_\_\_\_\_

**E-mail** \_\_\_\_\_ **Cell Phone** \_\_\_\_\_

**May we text you?**  Yes     No    **Preferred method of contact:**  email     cell (phone call)     cell (text)

**Languages Spoken (Indicate degree of fluency)** \_\_\_\_\_

**Place of Employment** \_\_\_\_\_ **Position** \_\_\_\_\_

**In the unlikely event of an emergency, whom should we contact on your behalf?**

**Name of Emergency Contact** \_\_\_\_\_

**Relationship** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Education**

**High School Graduate**  Yes     No     G.E.D.                      **Highest Degree Attained** \_\_\_\_\_

**Are you currently a student?**                       Yes, Full Time     Yes, Part Time     No

**If applicable, School Presently Enrolled or Graduated** \_\_\_\_\_

**If applicable, Major** \_\_\_\_\_ **Minor** \_\_\_\_\_

**(Expected) Graduation Date** \_\_\_\_\_ **Career Interest(s)** \_\_\_\_\_

**Background Information (Optional)** NAMI Delaware is an inclusive, welcoming non-profit organization that aims to reflect its diverse communities statewide. We do not discriminate and would not exclude you from serving as an intern or volunteer based on any of the following information. We gather this data in an effort to best match outreach and advocacy opportunities as they arise, as well as to document statistics for grant-writing and other funding applications.

*Your participation in this Background Information section is optional.*

DOB \_\_\_/\_\_\_/\_\_\_ Gender \_\_\_\_\_ Family Member of a Veteran  Yes  No

Race/Ethnicity:  African-American  Caucasian  Native American  Latino  Asian

Other, please specify \_\_\_\_\_

Is there any other way in which you identify? \_\_\_\_\_

**NAMI Delaware’s mission is “to support, educate and advocate until there is a cure for severe and persistent mental illness.”**

The National Alliance on Mental Illness in Delaware (NAMI Delaware) is a statewide organization of families, individuals with a diagnosed mental health condition, friends and professionals. Established in 1983, NAMI Delaware is dedicated to improving the quality of life for those affected by life-changing mental illnesses such as depression, bipolar disorder, schizophrenia, schizoaffective disorder, anxiety, PTSD, obsessive compulsive disorder and others. NAMI Delaware strives to reach all Delawareans whose lives have been affected by mental illness through various outreaches including education, support, advocacy, and housing. No previous affiliation with NAMI Delaware or experience with mental health is required for this internship/ volunteer position. However, if you feel comfortable with disclosing this information, we would like to understand your background with mental health in order to support you throughout this experience.

**Are you currently a NAMI Delaware member?**  Yes  No

**If no, would you be interested in a student/volunteer membership?**  Yes  No

A number of NAMI Delaware staff and volunteers have lived experience with mental illness. As a professional community dedicated to serving individuals and loved ones affected by mental illness, NAMI Delaware welcomes disclosing lived experience, if desired; however, it is not an expectation, nor is lived experience a requirement. If you would like to share any lived experience you may have, please check any that apply:

Self  Spouse  Friend  Parent  Child

Other, (please specify): \_\_\_\_\_  Mental Health is a career interest

Do you have any other lived experience or personal feelings regarding mental health that you’d like to share?

\_\_\_\_\_

Do you need any special accommodations in order for this internship/ volunteer position?  Yes  No

If yes, please specify \_\_\_\_\_

Do you have reliable transportation?  Yes  No If yes, specify:  Car  Bicycle

Public Transportation

Why do you want to be an intern/ volunteer at NAMI Delaware? \_\_\_\_\_

Please identify one positive attribute you bring to this internship/ volunteer experience.

Please identify one area of growth you hope to strengthen during this internship/ volunteer experience.

**Intern Only:** What, if any, are your academic internship requirements? *Please attach relevant documentation.*

### **Tell Us More about Your Interest & Experience**

NAMI Delaware relies on its members, friends, interns, and volunteers to make its services and programs possible. We would like to know about your past and present work and volunteer experiences as well as your interests and goals for the future. Please CHECK those activities in which you feel you can best serve.

#### **Administrative Support Interests** (Check all that apply)

- Filing       Photocopying       Organizing (labeling, sorting, etc.)
- Answering Phones       Front Desk Reception

#### **Technology Support Interests** (Check all that apply)

- Data entry       Website Management       File Updating
- Social Media Management       Internet Research
- Email System (updates)       Create flyers, graphics, etc.
- Other interests (example, managing a YouTube Channel or podcast) \_\_\_\_\_

#### **Outreach, Public Policy/Advocacy Support Interests** (Check all that apply)

- Helpline (offering support and assistance to callers who need mental health information and services)
- Phone Outreach (returning calls, making follow up calls, notify members about issues like upcoming legislation affecting persons with mental illness, etc.)
- Follow proposed legislation during session, researching possible outcomes and reporting findings to staff
- Assist with communication via email and social media regarding mental health related public policy issues

#### **Event and Program Support Interest** (Check all that apply)

- Staff Outreach Booths at community fairs (assist with set up/break down, be an ambassador for NAMI Delaware by providing community with brochures on housing, programs, etc.)
- Meetings/Programs/Events (greeter, assist with set-up/break down, sell merchandise, etc.)
- Other, please specify \_\_\_\_\_

#### **Resource Materials & Newsletter Interest** (Check all that apply)

- Help to edit educational pamphlets or resource materials
- Help develop new resource material content for print or website publication
- Desktop publishing & typing       Graphic design or Photo shop

Please share any previous experience or special interest you have with any of the items you selected on page 3.

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Do you have anything additional to add or any questions for us?

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Please let us know what days and times you are available (Specify what hours):

Sunday	_____ am/pm to _____ am/pm
Monday	_____ am/pm to _____ am/pm
Tuesday	_____ am/pm to _____ am/pm
Wednesday	_____ am/pm to _____ am/pm
Thursday	_____ am/pm to _____ am/pm
Friday	_____ am/pm to _____ am/pm
Saturday	_____ am/pm to _____ am/pm

Please let us know what date you are available to begin: \_\_\_\_\_

Please indicate any windows of time you are not available (ie. Spring Break or Summer Break)

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Thank you for your interest in an internship or volunteer position with us. NAMI Delaware actively recruits, engages and serves members from every race, culture, ethnicity, age, religion, socio-economic status, sexual orientation, gender, gender identity and disability and does not discriminate in the requirements for membership, provision of service or support or in its policies or actions. We strive to support recruitment and retention of a diverse and inclusive membership and leadership. We are grateful for your interest in becoming part of the NAMI Delaware team.

Please contact Anne Slease, Director of Advocacy and Education via email [aslease@namide.org](mailto:aslease@namide.org) or by phone (302) 427-0787 ext. 125 with any questions.

**For Office Use Only**

**Applicant:** \_\_\_\_\_  **Intern**       **Volunteer**

**For Interns Only**      School: \_\_\_\_\_

Term:     FALL       SPRING       SUMMER       OTHER \_\_\_\_\_

Interview Date: \_\_\_\_\_ Conducted by: \_\_\_\_\_

Approved     Yes  No    Position: \_\_\_\_\_

Recommended for Helpline  Yes  No      Notes: \_\_\_\_\_

Orientation Date: \_\_\_\_\_ Orientation Conducted by: \_\_\_\_\_

Start Date: \_\_\_\_\_ Supervisor: \_\_\_\_\_

Details added to Outlook Calendar by \_\_\_\_\_ on (date) \_\_\_\_\_

On-boarding Orientation Date: \_\_\_\_\_ To be conducted by \_\_\_\_\_

Helpline Training Date: \_\_\_\_\_ To be conducted by \_\_\_\_\_

Application Scanned and Electronically filed by \_\_\_\_\_ date: \_\_\_\_\_

Handbook Consent Form Signed and Electronically filed by \_\_\_\_\_ date: \_\_\_\_\_

Confidentiality Form Signed and Electronically filed by \_\_\_\_\_ date: \_\_\_\_\_

Photo Taken by \_\_\_\_\_ date \_\_\_\_\_

ID card issued: by \_\_\_\_\_ date: \_\_\_\_\_