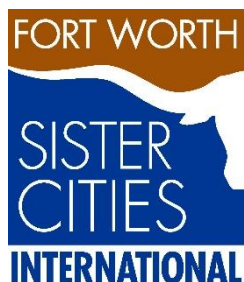


Fort Worth Sister Cities International  
P.O. Box 17879  
Fort Worth, TX 76102  
p/817.632-7100  
f/817.632-7110  
www.fwsistercities.org



CONNECTING GLOBALLY.  
THRIVING LOCALLY.

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Fort Worth Sister Cities  
International is a 501(c)(3)  
nonprofit organization  
Federal Tax I.D. Number  
75-2057300



Dear Volunteer Applicant:

Thank you for supporting Fort Worth Sister Cities International and its many volunteer opportunities. It is quite a privilege to attract so many outstanding citizens in our community to perform volunteer work with our organization. Our success and accomplishments over the years are the direct result of dedicated, hard-working volunteers.

Fort Worth Sister Cities International prides itself in providing a safe yet fun environment for its programs. One of the many ways in which we are able to ensure this is through our ***Volunteer Application*** process.

All volunteers working with our youth programs, home hosting, or driving guests are required to go through this process. Enclosed is our application packet that consists of the following (please complete these documents and return to our office within 2 weeks):

1. *Volunteer Application* (4 pages) – required for all applicants.
2. *Consent for Criminal Background History Check* – required for all applicants and all household members if home hosting.
3. *Application for Copy of Driver Record* (print and sign in black, front page only) and *Driving/Traffic Violation Information* – **both documents are required only if you will provide any transportation services.**

Also enclosed is the Fort Worth Sister Cities' ***Volunteer Manual***. Please read this manual, sign and return the last page along with the items listed above, as required. Please note that all information received will be treated with complete confidentiality. Once the information has been verified and a decision has been made regarding your application, all information will be destroyed excluding the signed Applicant Statement page and the signed *Consent for Criminal Background History* form (information provided for date of birth, social security number, and driver's license number will be obliterated so that no one will be able to determine these.)

It is a great pleasure to welcome you in advance to our organization and we thank you for your cooperation in keeping it safe for our members and our community. Should you have any questions or considerations, please do not hesitate to contact us.

Sincerely,

Mae Ferguson  
President/CEO

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Melissa Thompson  
Libby Watson

Mae Ferguson, President/CEO

Bandung, Indonesia   Budapest, Hungary   Guiyang, China   Mbabane, eSwatini  
Nagaoka, Japan   Reggio Emilia, Italy   Toluca, Mexico   Trier, Germany



# Volunteer Application

Vol Code:

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Application is for (check all that apply):**

Event Assistance (decorations, etc.)

Language/Translation

Transportation Provider/Visitor Help

Home Host (must complete page 3)

Office Help (copies, phone, mailing, etc.)

Youth Chaperone

Inbound Exchange Youth Leader

Outbound Exchange Youth Leader

Other (please describe): \_\_\_\_\_

How frequently are you available to volunteer: \_\_\_\_\_

What days/times are most convenient for you: \_\_\_\_\_

## APPLICANT INFORMATION (Please print):

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

Gender

(M/F): \_\_\_\_\_ Email: \_\_\_\_\_

Home \_\_\_\_\_ Cell \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Gender

(M/F): \_\_\_\_\_ Email: \_\_\_\_\_

Home \_\_\_\_\_ Cell \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

If necessary, please provide best time to call you: \_\_\_\_\_

If necessary, please provide best time to call you: \_\_\_\_\_

May we contact you at work? Yes # \_\_\_\_\_ No

May we contact you at work? Yes # \_\_\_\_\_ No

Please provide best time to call you at work: \_\_\_\_\_

Please provide best time to call you at work: \_\_\_\_\_

Address \_\_\_\_\_

STREET

CITY

STATE

ZIP CODE

**ANSWERING "YES" TO ANY OF THE FOLLOWING QUESTIONS DOES NOT CONSTITUTE AN AUTOMATIC DISQUALIFICATION TO VOLUNTEER. FACTORS SUCH AS DATE OF THE OFFENSE, SERIOUSNESS AND NATURE OF VIOLATION, REHABILITATION AND POSITION(S) APPLIED FOR WILL BE TAKEN INTO ACCOUNT. (This section applies to *all* members in the household.)**

Have you ever pled "guilty" or "no contest" to a crime (felony or misdemeanor)? ..... Yes No

Have you ever been convicted of a crime (felony or misdemeanor)? ..... Yes No

Are you presently under charges for a crime (felony or misdemeanor)? ..... Yes No

If you answered yes to any of the questions above, please provide the date(s) and details:

## PERSONAL REFERENCES:

List name and telephone number of three personal references who are *not* related to you and who are not listed below as employment references.

NAME	RELATIONSHIP	TELEPHONE	YEARS KNOWN
		( )	
		( )	
		( )	

## EMPLOYMENT REFERENCES:

Provide the following information of your past and current employers, starting with the most recent.

### Applicant

Employer	Telephone	Dates Employed
Address		Reason for leaving
Position/Title		
May we contact as a reference ____ Yes ____ No If no, please explain:		Summarize Type of Work Performed:

Employer	Telephone	Dates Employed
Address		Reason for leaving
Position/Title		
May we contact as a reference ____ Yes ____ No If no, please explain:		Summarize Type of Work Performed:

### 2<sup>nd</sup> Applicant

Employer	Telephone	Dates Employed
Address		Reason for leaving
Position/Title		
May we contact as a reference ____ Yes ____ No If no, please explain:		Summarize Type of Work Performed:

Employer	Telephone	Dates Employed
Address		Reason for leaving
Position/Title		
May we contact as a reference ____ Yes ____ No If no, please explain:		Summarize Type of Work Performed:

## SKILLS AND QUALIFICATIONS (Optional):

Summarize any special training, experience, skills, licenses, certificates, degrees, or other information about which we should be aware.


## Home Hosting Details (to be completed by Home Hosting applicants only)

Please provide the following information for each person living in your home, beginning with the name of applicant. Each person listed here must complete and sign the ***Consent for Criminal Background History*** form also. Each name listed must include the location where the person has lived at least in the past 7 years, beginning with current residence.

**Home Address:** \_\_\_\_\_

NAME	Gender (M/F)	Date of Birth	Employer / School	H.S. Grad. Year	Lived at above address at least 7 yrs.?	If <i>No</i> at left is checked, please provide other cities and states you have lived in the past	
						City	State/Years
					Yes No		/
					Yes No		/
					Yes No		/
					Yes No		/
					Yes No		/
					Yes No		/
					Yes No		/

Have you or any of the household members listed above ever been arrested or convicted of a crime? ☐ Yes ☐ No If the answer is YES, please provide the date(s) and specific details and explain why we should consider your application further in the **Consent for Criminal Background History Check.**

**PLEASE CHECK ALL THAT APPLY**

Do you prefer a visitor from?      China      Germany      Hungary      Indonesia  
    Italy      Japan      Mexico      Swaziland

Do you prefer?      Male      Female      Youth      Adult

How long are you willing to host?      One week or less      Less than a month      Over a month

What type of guest would you prefer?      Student      Teacher      Business      Medical  
    Arts/Culture      Sports      Any      \_\_\_\_\_

How many guests can you host at one time? \_\_\_\_\_

Are you able to provide transportation to and from activities for your guests?    Yes    No    If Yes, please complete the Driving/Traffic Violation Information form.

Describe your hours and days available for hosting. \_\_\_\_\_

Will you host someone who **smokes**?      Yes      No

List hobbies and family interest. \_\_\_\_\_

Please indicate features of your home:

Indoor Pets (please indicate number and describe) \_\_\_\_\_

Outdoor Pets (please indicate number and describe) \_\_\_\_\_

Pool    Musical Instrument (please specify) \_\_\_\_\_

**Applicant Statement (to be read and completed by all applicants)**

I/we certify that all information provided is true, complete, and correct. I/we understand that any information provided by me/us that is found to be false, incomplete, or misrepresented in any respect, will be sufficient cause to cancel further consideration of this application.

I/we expressly authorize, without reservation, Fort Worth Sister Cities International (FWSCI), its representatives, employees or agents to contact and obtain information from all references (personal and professional), employers, public agencies, licensing authorities and educational institutions and to otherwise verify the accuracy of all information provided by me/us in this application and personal interview. I/we hereby waive any and all rights and claims I/we may have regarding the organization, its agents, employees or representatives, for seeking, gathering and using such information in this process and all other persons, corporations or organizations for furnishing such information about me/us.

**I/we understand that the information furnished in this application will be kept confidential. Furthermore, I understand that from time to time as determined by Fort Worth Sister Cities International, verification may be obtained to ensure that FWSCI has current information on all of its volunteers. At the request of FWSCI, I/we shall submit and complete a new application for this purpose.**

**DO NOT SIGN UNTIL YOU HAVE READ THE ABOVE APPLICANT STATEMENT**

I/we certify that I/we have read, fully understand and accept all terms of the foregoing Applicant Statement.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Please continue to page 4-a to read and sign the confidentiality certification.



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Mark Nordin  
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Michael Roemer, PhD  
Jay Sandelin  
Greg Upp

Fort Worth Sister Cities  
International is a 501(c)(3)  
nonprofit organization  
Federal Tax I.D. Number  
75-2057300



## Confidentiality Policy for Employees, Volunteers and Board Members

Respecting the privacy of our clients, donors, members, staff, volunteers and of Fort Worth Sister Cities International itself is a basic value of Fort Worth Sister Cities International. Personal and financial information is confidential and should not be disclosed or discussed with anyone without permission or authorization from the President and CEO of Fort Worth Sister Cities International. Care shall also be taken to ensure that unauthorized individuals do not overhear any discussion of confidential information and that documents containing confidential information are not left in the open or inadvertently shared.

Board members, volunteer leaders, and employees of Fort Worth Sister Cities International may be exposed to information which is confidential and/or privileged and proprietary in nature. It is the policy of Fort Worth Sister Cities International that such information must be kept confidential both during and after employment or volunteer service. Staff and volunteers, including board members, are expected to return materials containing privileged or confidential information at the time of separation from employment or expiration of service.

Unauthorized disclosure of confidential or privileged information is a serious violation of this policy and will subject the person(s) who made the unauthorized disclosure to appropriate discipline, including removal/dismissal.

## Certification

I have read Fort Worth Sister Cities International's policy on confidentiality and the Statement of Confidentiality presented above. I agree to abide by the requirements of the policy and inform my supervisor immediately if I believe any violation (unintentional or otherwise) of the policy has occurred. I understand that violation of this policy will lead to disciplinary action, up to and including termination of my service with Sister Cities International.

Signature\_\_\_\_\_

Name\_\_\_\_\_

Date\_\_\_\_\_

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Veronica Chavez Law, *Chair*  
Becky Renfro Borbolla, *Chair Elect*  
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Ronda Stucker  
Walter Stucker  
Robert Sturns  
Andy Taft  
Melissa Thompson  
Libby Watson

Mae Ferguson, President/CEO

# Consent for Criminal Background Check

I/we hereby give my/our permission for Fort Worth Sister Cities to obtain information relating to my/our criminal history record. The criminal history record may include arrest and conviction data as well as plea bargains and deferred adjudications and delinquent conduct committed as a juvenile. I/we understand that this information will be used, in part, to determine my/our eligibility for a volunteer position with Fort Worth Sister Cities. I/we also understand that as long as I/we remain a volunteer at Fort Worth Sister Cities, the criminal history records check may be repeated at any time. I/we understand that I/we will have an opportunity to review the criminal history as received by Fort Worth Sister Cities and a procedure is available for clarification if I/we dispute the accuracy of the record received.

I/we, the undersigned, do, for myself, my heirs, executors and administrators, hereby remise, release and forever discharge and agree to indemnify Fort Worth Sister Cities and each of its officers, directors, employees, and agents and hold them harmless from and against any and all causes of actions, suits, liabilities costs, debts and sums of money, claims and demands whatsoever (including claims for the negligence, gross negligence, and/or strict liability of Fort Worth Sister Cities), and any and all related attorneys' fees, court costs, and other expenses resulting from the investigation of my/our background in connection with my/our application to become a volunteer.

**Note:**  
**If you are volunteering for Home Hosting, all household members must complete and sign this form. If a household member is qualified for the exemption, please check that box and submit required documentation from his/her employer.**

**If any household members have been arrested or convicted of a crime, please provide the date(s) and specific details and explain why we should consider your application further (attach additional sheets as needed):**

---

---

---

## Applicant:

I seek exemption from Criminal Background History Check due to the fact that my current employment/licensure requires me to have undertaken similar or more stringent background check in order to be employed/licensed. I have attached a signed letter from my employer on my employer's letterhead attesting to this fact.

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Legal Name (include middle name): \_\_\_\_\_

Other Names, Alias, Married, Maiden: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License No. & State Issued: \_\_\_\_\_

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

**Complete below for ALL household members if applicant is HOME HOSTING.**

## 2<sup>nd</sup> Household Member

I seek exemption from Criminal Background History Check due to the fact that my current employment/licensure requires me to have undertaken similar or more stringent background check in order to be employed/licensed. I have attached a signed letter from my employer on my employer's letterhead attesting to this fact.

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Legal Name (include middle name): \_\_\_\_\_

Other Names, Alias, Married, Maiden: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License No. & State Issued: \_\_\_\_\_

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

**3<sup>rd</sup> Household Member**

I seek exemption from Criminal Background History Check due to the fact that my current employment/licensure requires me to have undertaken similar or more stringent background check in order to be employed/licensed. I have attached a signed letter from my employer on my employer's letterhead attesting to this fact.

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Legal Name (include middle name): \_\_\_\_\_

Other Names, Alias, Married, Maiden: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License No. & State Issued: \_\_\_\_\_

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

---

**4<sup>th</sup> Household Member**

I seek exemption from Criminal Background History Check due to the fact that my current employment/licensure requires me to have undertaken similar or more stringent background check in order to be employed/licensed. I have attached a signed letter from my employer on my employer's letterhead attesting to this fact.

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Legal Name (include middle name): \_\_\_\_\_

Other Names, Alias, Married, Maiden: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License No. & State Issued: \_\_\_\_\_

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

---

**5<sup>th</sup> Household Member**

I seek exemption from Criminal Background History Check due to the fact that my current employment/licensure requires me to have undertaken similar or more stringent background check in order to be employed/licensed. I have attached a signed letter from my employer on my employer's letterhead attesting to this fact.

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Legal Name (include middle name): \_\_\_\_\_

Other Names, Alias, Married, Maiden: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License No. & State Issued: \_\_\_\_\_

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

---

**6<sup>th</sup> Household Member**

I seek exemption from Criminal Background History Check due to the fact that my current employment/licensure requires me to have undertaken similar or more stringent background check in order to be employed/licensed. I have attached a signed letter from my employer on my employer's letterhead attesting to this fact.

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Legal Name (include middle name): \_\_\_\_\_

Other Names, Alias, Married, Maiden: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Driver's License No. & State Issued: \_\_\_\_\_

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

**Attach additional sheets as needed.**





**Driving/Traffic Violation Information**  
**Complete if applicant will provide transportation services**

	<u><b>Driver 1</b></u>	<u><b>Driver 2</b></u>
Do you have a valid driver's license?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have valid auto insurance?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Answering “YES” to any of the following questions will not constitute an automatic rejection to volunteer. Factors such as date of the offense, seriousness and nature of violation will be taken into consideration. Please explain any “Yes” answers below.**

Have you been convicted of <b>Driving While Intoxicated (DWI)</b> or <b>Driving Under the Influence (DUI)</b> ?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Have you ever been convicted of <i><b>Failure to Stop and Render Aid?</b></i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Has your driver's license been suspended within the past 36 months (3 years)?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you have any traffic (including DWI, DUI) charges currently pending against you?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

**Please explain Yes answers here (attach additional sheets as necessary):**

<u><b>Driver 1</b></u>	<u><b>Driver 2</b></u>
Name (please print)	Name (please print)
Signature	Signature
Date	Date



## **VOLUNTEER MANUAL**

January 2015  
Revised September 2017

# Fort Worth Sister Cities International Volunteer Manual

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# **Fort Worth Sister Cities International Volunteer Manual**

## **INTRODUCTION**

In 1956, President Dwight D. Eisenhower proposed the people-to-people concept. President Eisenhower thought that relationships fostered in this program would lessen the possibility of future world conflicts. This concept grew and eventually led to the creation of Sister Cities International (SCI). SCI is a nonprofit citizen diplomacy network creating and strengthening partnerships between U.S. and international communities in an effort to increase global cooperation at the municipal level, to promote cultural understanding and to stimulate economic development. SCI leads the movement for local community development and volunteer action by motivating and empowering private citizens, municipal officials and business leaders to conduct long-term programs of mutual benefit.

The City of Fort Worth joined SCI in 1985 and began actively seeking its first partner. Criteria for city partnerships include mutual interest, long-term commitment, financial resources for exchanges and programs, existing linkages, chamber relations, community support, cultural and educational venues, accessibility to a major airport and diplomatic relations. Fort Worth signed its first agreement with Reggio Emilia, Italy in 1985. Since then, relationships have been established with Nagaoka, Japan (1987); Trier, Germany (1987); Bandung, Indonesia (1990); Budapest, Hungary (1990); Toluca, Mexico (1998); and Mbabane, Swaziland (2004) and soon Guiyang, China.

Fort Worth Sister Cities (FWSCI) is a non-profit organization under contract with the City of Fort Worth to operate the Sister Cities program. It is a membership organization supported by membership dues, private donations, grants, special events, and by the City of Fort Worth. The mission of FWSCI is to advance peace through lasting relationships and international understanding.

Since its inception, FWSCI has won numerous awards for its outstanding programs. Used as a model throughout the country, FWSCI has developed unique and innovative programs in order to “take the U.S. abroad and bring the world back home.”

The organization’s success and accomplishments over the years is a direct result of dedicated, hard-working volunteers. FWSCI welcomes you as a volunteer and thanks you in advance for your efforts on behalf of this great city and the cause of peace.

This Volunteer Policy Manual provides you with some of the information you will need to be a successful volunteer. If you have any questions or comments after reviewing the manual, please contact the office at 871.632-7100 or email [joseph@fwsistercities.org](mailto:joseph@fwsistercities.org).

# **Fort Worth Sister Cities International Volunteer Manual**

## **BECOMING A VOLUNTEER**

### **Definition of Volunteer**

A volunteer is anyone who is appointed by FWSCI to perform tasks on behalf of the organization without expectation of compensation.

### **Membership**

All volunteers must be registered members of the organization. Membership in FWSCI is offered at many levels to meet the needs of youth, individuals, community organizations and businesses. For more information, visit our web site at [www.fwsistercities.org](http://www.fwsistercities.org).

### **Recruitment and Appointment**

Because different volunteer opportunities exist throughout the organization, a variety of methods may be used to recruit and appoint volunteers.

Any staff member or member of the Board of Directors may appoint volunteers. Appointments may be made orally or in writing.

However, volunteers working in direct capacity with youth programs must be appointed in writing after completing a FWSCI Volunteer Application and undergoing a screening process, which will include:

- 1) a check of at least 3 personal references
- 2) a criminal history check
- 3) a personal interview conducted by a member of the staff
- 4) a review of driving record (if appropriate)
- 5) other procedures or activities deemed appropriate by staff or the Board of Directors.

Volunteers considered to have a direct involvement with youth programs include, but are not limited to, home hosts, in-bound and out-bound exchange leaders, in-bound and out-bound associate leaders, youth event chaperones, youth transportation providers, and teachers and aids of the International Leadership Academy program.

Volunteers who are not working with youth programs may still be required to complete a Volunteer Application and undergo a screening process at the discretion of staff or the Board of Directors. Positions in which this might be required include, but are not limited to, home hosts of adult visitors, delegation leaders for in-bound and out-bound adult programs, and providers of transportation.

## **EQUALITY OF OPPORTUNITY**

FWSCI is committed to the principle of equal opportunity in employment and volunteer opportunities. No person will be denied opportunity for employment or volunteer positions or be subject to discrimination in any project, program, or activity because of race, color, religion, national origin, sex, age, sexual orientation, or handicap or disability.

# **Fort Worth Sister Cities International Volunteer Manual**

## **ORIENTATION AND TRAINING**

Due to the varied nature of volunteer activities for the organization, some volunteer roles will not require orientation or training. However, volunteers are encouraged to clarify any questions about their role and responsibility with staff or the person who appointed them.

Some volunteer positions will require more formal orientations or training. These include, but are not limited to:

- 1) any volunteer with leadership responsibility for the organization
- 2) any volunteer with leadership responsibility for a board-appointed committee
- 3) any volunteer with leadership responsibility or supervisory role over youth or youth programs
- 4) any volunteer with leadership responsibility for adult in-bound or out-bound programs.

The exact nature of the orientation and training will vary based on the details of the position. Orientations and/or training may be one-on-one or in a group.

## **SUPERVISION**

All volunteers are appointed under the supervision of staff and the Board of Directors. The volunteer should consider the person who appointed him or her as his or her direct supervisor unless directed otherwise by the appointer. Any volunteer may contact the President/CEO to report any questions, concerns, or problems with a volunteer activity or with the volunteer's direct supervisor.

## **CODE OF CONDUCT**

### **Introduction**

FWSCI and its members represent the City of Fort Worth to many individuals and organizations around the world. Therefore, FWSCI insists volunteers maintain high ethical standards. In an effort to maintain these high standards, the following code of conduct is applicable to all volunteers, both as direct rules and as a general guideline for other areas of conduct, which may not be mentioned directly herein.

### **Reporting Violations**

Any person who observes, learns of, or, in good faith, suspects a violation of the Code, must immediately report the violation to his or her supervisor, to the President/CEO, or to a member of the Board of Directors. Reported violations will be investigated and addressed promptly and will be treated with confidentiality to the extent possible. A violation of the Code may result in disciplinary action, up to and including termination of service. The President/CEO and/or the Board of Directors will review all violations and determine the disciplinary action.

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### **Waivers of the Code of Conduct**

Requests for a waiver of a provision of the Code must be submitted in writing to the President/CEO for review. Only the President/CEO or the Board of Directors has the authority to waive a provision of the Code.

Statements in the Code to the effect that certain actions may be taken only with “organizational approval” will be interpreted to mean the President/CEO or the Board of Directors must give prior approval before the proposed action may be undertaken.

### **Violations of Law**

A variety of laws apply to the organization and its operations, and some carry criminal penalties. FWSCI must and will report all suspected criminal violations to the appropriate authorities for possible prosecution and will investigate, address and report, as appropriate, non-criminal violations.

### **Conflicts of Interest**

A conflict of interest can occur or appear to occur in a wide variety of situations. Generally speaking, a conflict of interest occurs when a director, officer, employee, agent, or such person’s immediate family’s personal interest interferes with, has the potential to interfere with, or appears to interfere with the interest of FWSCI. No person who has a conflict of interest with any activity of FWSCI shall serve as a volunteer for that activity.

### **Confidentiality**

Volunteers are responsible for maintaining the confidentiality of all privileged or sensitive information, whether about the organization or members of the organization, to which they are exposed while serving as a volunteer.

### **Harassment**

FWSCI prohibits all forms of harassment, including sexual harassment. Sexual harassment includes unwelcome sexual advances as well as verbal or physical conduct of a sexual nature that intends to or actually creates an intimidating, hostile, or offensive environment. Conducts that will not be tolerated include, but is not limited to: inappropriate touching, sexual innuendos, obscene gestures, and jokes and remarks of a sexual nature. Any form of harassment on the basis of race, color, religion, sex, age, national origin, or disability is likewise prohibited.

### **Child Abuse**

FWSCI forbids any volunteer to physically, sexually, or mentally abuse or neglect a child or youth program participant. At no time shall a volunteer strike, spank, shake, humiliate, ridicule, threaten, or degrade youth.

### **Drugs, Alcohol, Tobacco**

Volunteers shall not:

- Use tobacco products in the presence of youth
- Be under the influence of alcohol when volunteering at youth programs or exchanges
- Use, possess, or be under the influence of illegal drugs at any time

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## **Firearms/Weapons**

No volunteer shall carry or bring to a FWSCI event any dangerous or potentially dangerous weapon, article, or substance.

## **Safe Environment**

Volunteers should promote a safe and positive environment at all times.

## **Role Model**

Volunteers working at youth programs and events should serve as a good role model for students and exhibit a caring, honest, and professional attitude. This includes, but is not limited to, refraining from the use of profanity in the presence of youth.

## **Proper Use of Corporate Assets**

Corporate assets, including information, materials, supplies, time, intellectual property, facilities, software, and other assets may be used only for legitimate business purposes. The personal use of corporate assets is prohibited. The use of assets for proper purposes should be approved by the appropriate staff member or member of the Board of Directors. When handling financial information, volunteers shall:

- Act with honesty and integrity, avoiding conflicts of interest
- Provide the organization with accurate, complete, objective, relevant and timely information regarding transactions
- Comply with all federal, state, and local laws and regulations
- Act in good faith and with due care, competence and diligence

## **Other**

Volunteers shall make every effort to:

- Treat everyone with respect, patience, courtesy and dignity.
- Avoid situations where he/she is alone with a youth.
- Refrain from giving or receiving expensive gifts from youths.
- Report any suspected abuse to the Board of Directors or the President/CEO.



## VOLUNTEER CODE OF CONDUCT ACCEPTANCE

I/we certify that I/we have read and understand the Code of Conduct of Forth Worth Sister Cities International and agree to comply with it.

Signature	
Print Name	
Date	

Signature	
Print Name	
Date	

Signature	
Print Name	
Date	

Signature	
Print Name	
Date	

Signature	
Print Name	
Date	