



SOMALI AMERICAN UNITED COUNCIL OF ARIZONA

Serving ALL Multiethnic Refugees

The Somali- American United Council of Arizona SAUC promotes better understanding between the multi-ethnic refugee community and other American communities, as well as helping refugees resettle properly, integrate, become productive law-abiding citizens, and achieve social and economic self-sufficiency in the American society. It helps newly arrived families adjust to their new lives, new location, new language and new culture.

Our organization encourages the participation of volunteers who support our mission. If you agree with our mission and are willing to be interviewed and trained in our procedures, we encourage you to complete this application. The information on this form will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you.

Mission

To guide the Multiethnic Community of Refugees to better integrate into mainstream American Society while preserving their own culture

Vision

To become a premier institution that provides high quality services to the Multiethnic Refugee Community in Arizona and prepare individuals achieve self-sufficiency and become law abiding citizens.

The Main Objectives of SAUC of Arizona:

TO improve communication, provide information and contribute to the well-being of the Multiethnic Refugee Community of Arizona. To assist them in becoming contributing participants in the American society.

TO positively impact the improvement of human conditions, develop dynamic and efficient community leaders and socially committed people who are able to work successfully in collaboration, achieve self-sufficiency and have wisdom toward ignorance eradication.

TO cultivate resolute moral values and become well prepared for life challenges.

TO develop skills for better performance and professional excellence and always be the best in competition and change.

TO maintain high standards of performance, code of ethics and commitment to service and empowerment.

It is the policy of the Somali-American United Council to provide equitable services without discrimination against or harassment of, any person on the basis of race, color, national origin, language, religion, sex, age, disability, citizenship, marital status, creed, sexual orientation or other non-medically relevant factor or any other characteristic protected by federal or state law. Any such discrimination or harassment is prohibited and will not be tolerated. This applies to case management, class enrollment and participation, transportation to and from any of the Somali-American United Council of Arizona activities or events.

In the event a request for accessing programs, services or facilities cannot be resolved, an individual may file a grievance within 30 days of the alleged violation. This can be done verbally or in writing by contacting Dr. Mohamed Ali Abukar, President and CEO of the Somali-American United Council by calling 602- 522-2100 2425 E. Thomas Rd. Suite 11, Phoenix, AZ 85016 or via email to: m.abukar@somaliunitedcouncil.org



SOMALI AMERICAN
 UNITED COUNCIL OF ARIZONA
Serving ALL Multiethnic Refugees

VOLUNTEER APPLICATION

Name: _____ Date: _____

Address: _____ City: _____ State ____ Zip: _____

Phone: _____ Email Address: _____

Any special talents or skills you have that you feel would benefit our organization:

Do you have any physical limitations: _____

In case of an emergency contact: _____ Phone # _____

The Somali-American United Council works with vulnerable individuals that need to be protected at all times. The Department of Economic Security provides funding for all activities and requires all employees and volunteers to have a fingerprint clearance card and also has to send the information of all these individuals to a central registry background check.

Do you have any problem with the SAUC sending your information for a background check? ____ yes ____ no
 The following additional information is needed for a background check with the Arizona central registry:

Social Security number _____ Alias name(s) _____

Do you have a current fingerprint clearance card? __ yes __ no If not, when can you apply for one? _____

Interests: Please tell us in which areas you are interested in volunteering:

Morning	Afternoon/Evening*	Additional Opportunities*
	*If offered	*Morning/Afternoons 10pm-5pm
<input type="checkbox"/> Sewing M, T, W, Th 12:30pm-2pm Fridays 9am-10am	<input type="checkbox"/> English lessons for Work Readiness	<input type="checkbox"/> Health Education
<input type="checkbox"/> Computer Class Fridays 10am-12pm	<input type="checkbox"/> Early Literacy Skills M & W 6:30pm-8pm	<input type="checkbox"/> Summer Youth Enrichment June-July Thursday Afternoons
<input type="checkbox"/> Early Literacy Skills M, T, W, & Th 10am - 12pm	<input type="checkbox"/> Cultural Adaptation Class W 5pm -6pm	<input type="checkbox"/> Tutoring 1:1 English <input type="checkbox"/> Tutoring 1:1 Citizenship
<input type="checkbox"/> English as a Second Language M, T, W, & Th 10am - 12pm	<input type="checkbox"/> English as a Second Language W and Th 6:30pm-8pm	<input type="checkbox"/> Filing
<input type="checkbox"/> Citizenship Class M, T, W, & Th 10am-12pm	<input type="checkbox"/> Citizenship Class Tuesday 6:30pm-8pm	<input type="checkbox"/> Office Work/Organization
<input type="checkbox"/> Preschool M, T, W, Th 10am-12pm	<input type="checkbox"/> Youth Class: Leaders for Life Thursdays 5 pm to 6 pm	<input type="checkbox"/> Job skills/ Preparation/Computer

As a volunteer of the Somali-American United Council I agree to abide by the policies and procedures of this organization. I understand that I will be volunteering at my own risk and that the organization and affiliates, cannot assume any responsibility for any accident, injury or health problem which may arise from any volunteer work I perform for the organization. I agree that all the work I do is on a volunteer basis and I am not eligible to receive any monetary payment or reward.

Signature _____ Date _____