



**Greetings Perspective Volunteer,**

Thank you for your interest in participating as a volunteer and becoming a part of the “Champions Across the Bay” Mentorship Initiative, with My Daughter’s Keeper of Tampa Bay, Inc. “MDK” of Tampa Bay, Inc., a 501(c) 3 nonprofit educational and personal-development organization, established in 2007 to provide young girls, teens and youth (ages 10-18) and their caregivers year- round support and services, that addresses the gender specific issues and challenges that girls and youth experience during their adolescence, tweens & teen years.

Our purpose is to connect and empower young girls and youth by educating, engaging and inspiring hope with purpose through our programs and services that focus on six essential areas of development: self-image/character, health/wellness, education/career, community/leadership, healthy relationships, and spiritual enrichment. Our programs and activities are focused on the youth’s strengths and abilities to stand up and face the challenges they may encounter and to find the power within themselves to overcome their adversities and avoid at-risk activities and behaviors. In addition, services are tailored to meet the individual needs of young adults 18 & older and to be a resource through their journey into adulthood.

MDK of Tampa Bay, Inc. strives to encourage and empower mothers & caregivers to accept and take responsibility for raising their daughters and youth to become healthy, productive, confident, and self-respecting individuals. Our goal is to help develop and equip the young girls, teens and youth with the proper skills needed in preparing to pursue their dreams and goals. But most importantly use what has been instilled into them, to make a positive impact in their families, communities and society at large.

Please take a moment to complete the attached forms and forward back to us via email for review and processing. You will be notified of our receipt and provided with further instructions. Once again, thank you for your interest in My Daughter’s Keeper of Tampa Bay, Inc. If you have any questions, related to this process, please feel free to contact us at (727) 422-6827 or email us at [dwelch@mdktampabay.org](mailto:dwelch@mdktampabay.org).

Warmest Regards.

**Donna B. Welch**

**President/Executive Director**

*Attached Included*

*-Application*

*-Photo release*

# Volunteer Application Form



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

Position of Interest: \_\_\_\_\_

Last Name		First Name		Middle Initial	Maiden Name
Address					
City		State		Zip Code	
How long at above address?		How long have you lived in Florida?		How were you referred to MDK of Tampa Bay, Inc.?	
Previous Address: (If you have moved within the past 3 years)					
City		State		Zip Code	
Home Phone			Work Phone		
Email Address			Cell Phone		
Driver's License Number & Expiration Date (Include State Issued)			Date of Birth		
Please indicate any higher education or training completed			Do you have any additional certifications or certificates?		

### EMPLOYMENT HISTORY

Dates	Employer	Position	Skills & Experience

### REFERENCES

Name	Email Address	Phone Number

### EMERGENCY CONTACT INFORMATION

Name	Relationship	Phone Number

Please select specific areas of interest or experience:

- |                                                |                                                     |                                                      |                                               |
|------------------------------------------------|-----------------------------------------------------|------------------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Administrative        | <input type="checkbox"/> Grant Development          | <input type="checkbox"/> Prayer/Spiritual Enrichment | <input type="checkbox"/> Volunteer Service    |
| <input type="checkbox"/> Career Development    | <input type="checkbox"/> Marketing/Public Relations | <input type="checkbox"/> Program Development         | <input type="checkbox"/> Workshop Development |
| <input type="checkbox"/> Community Development | <input type="checkbox"/> Mentoring                  | <input type="checkbox"/> Special Events              | <input type="checkbox"/> Youth Services       |
| <input type="checkbox"/> Community Service     | <input type="checkbox"/> Music/Drama                | <input type="checkbox"/> Training                    | <input type="checkbox"/> Other: _____         |
| <input type="checkbox"/> Fundraising           | <input type="checkbox"/> Social Media               | <input type="checkbox"/> Tutoring/Education          |                                               |





## Photo Release Form

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I hereby grant permission to use photographs or to be photographed, voluntarily and without compensation, in print or online materials designed for news, informational or educational purposes related to **My Daughter's Keeper of Tampa Bay, Inc dba Envision Me Youth Academy** understanding that the same is intended for publication by print media, newspaper or video.

I additionally consent to the use of my name in connection with the publication by print media, newspaper, video, or of photographs taken of me.

I hereby release and discharge **My Daughter's Keeper of Tampa Bay, Inc dba Envision Me Youth Academy** from any and all claims arising out of the use of the photos, or any right that I or the minor may have.

\_\_\_\_\_  
First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Street or Mailing Address

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date