GENERAL INFORMATION		
Name:	Address	:
Home Phone:		
Cell Phone:		
Work Phone:	Email:	
EDUCATION & EMPLOYMENT		
What is the highest level of educati	on you have completed?	
☐ Did not complete high school	☐ High School or GEC	☐ Associate's Degree
☐ Bachelor's Degree	☐ Post-graduate degre	ee 🛘 Technical degree
Are you currently in school? Ye	S 🗆 NO	
Please provide either your current of	or most recent employer:	
Employer Name:	I	Phone:
Occupation:		
Please provide two (2) non-family r	references I	May we contact? □ YES □ NO
Personal Reference:	1	Professional Reference:
Name:	1	Name:
Phone:	I	Phone:
E-mail Address:	I	E-mail Address:
Relationship to you:	I	Relationship to you:
MISCELLANEOUS		
Ethnic Background:		
Languages you speak fluently:		
Describe any specialize training, sk	ills and hobbies:	

Have you ever been convicted of a felony or gross misdemeanor? □ YES

□ NO

If yes, please explain:
Please answer the following questions
How did you hear about the "Suicide Crisis Response Team"?
What other "volunteer" experience do you have?
Why did you decide to volunteer with the "Suicide Crisis Response Team"?
What led you to apply at this point in your life?
What characteristics do you feel you possess that particularly suit you for this type of work?
What personal characteristics might hinder you in this type of work?
What coping techniques have you developed for dealing with stress in your life?
What are the potential dangers of getting involved in another person's problems?
What thoughts do you have about talking to people with different moral or religion values than your own?

Please check the appropriate box
Do you have any previous training as a crisis responder?
□ Yes □ No
Do you have plans to leave this area within the next year?
□ Yes □ No
Does your employer/family know and approve of you doing this kind of work?
□ Yes □ No
Do you or does anyone in your family have a history of alcoholism, drug abuse or mental illness?
□ Yes □ No
Have you or has anyone close to you, ever made a suicide attempt or died by suicide?
□ Yes □ No
Are you currently, or have you ever been in therapy?
□ Yes □ No
If you are currently in therapy, are you able to get a letter from your mental health professional stating
that you are able to do this work?
□ Yes □ No
Please check the box that best represents your attitudes or beliefs
If I'm a "good enough counselor", I'll be able to solve most client problems.
☐ Disagree Strongly
□ Disagree
□ Neutral
□ Agree
☐ Agree Strongly
Please explain your response:
Anyone who states they are Lesbian, Gay, Bisexual, Transgender or Questioning disgusts me
□ Disagree Strongly
□ Disagree
□ Neutral
□ Agree
☐ Agree Strongly
Please explain your response:
Talking about suicide make me uncomfortable
☐ Disagree Strongly
□ Disagree

	Neutral
	Agree
	Agree Strongly
Please	explain your response:
It's Ok	a for other people to ask for help, but for me it is a sign of weakness.
_	
	Neutral
	Agree
	Agree Strongly
	explain your response:
If som	eone told me they were thinking of killing themselves, I would see it as my responsibility to talk
them o	out of it
	Disagree Strongly
	Disagree
	Neutral
	Agree
	Agree Strongly
Please	explain your response:
_	on is the answer to the world's problems
	Disagree Strongly
	Disagree
	Neutral
	Agree
	Agree Strongly
Please	explain your response:
I would	d consider getting professional counseling myself if circumstances warranted it
	Disagree Strongly
	Disagree
	Neutral
	Agree
	Agree Strongly
Please	explain your response:

The "Suicide Crisis Response Team" members require a 6 to 12 month commitment. This involves a 24 hour/7 days a week on-call shift. Please circle the days & times you are generally available to volunteer

SUN	MON	TUES	WED	THURS	FRI	SAT
Morning	Morning	Morning	Morning	Morning	Morning	Morning
Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon
Evening	Evening	Evening	Evening	Evening	Evening	Evening
Night	Night	Night	Night	Night	Night	Night
APPLICANT'S	STATEMENT					
I certify that	answers given	herein are tr	ue and comple	te to the best	of my knowled	dge. I authorize
investigation	of all stateme	ents containe	d in this applic	ation at the di	scretion of the	e "Suicide Crisis
Response Te	am". I unders	tand that all f	false or mislea	ding information	on given in my	y application or
	•		olunteer. I und is Response To		that I am requ	ired to abide by a
Signature of Applic	cant					_
	*****	*****	*****	*****	*****	****
	******	*****	******	******	******	*****
Please note t						
	hat we consid	er application	ns without rega	rd to race, col	or, religion, cr	eed, gender,
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Applicant notified:			
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Before I am given the application as a Suicide Crisis Response Volunteer Application

 I am required to have a background check at my own cost
• I have been instructed that I will need to get two (2) back ground checks (County and Navajo)
and submit the outcome of the background check.

I have completed the County Sheriff department background check, results will be submitted
□ Yes □ No
I have completed the Navajo Nation District Court background check, results will be submitted
□ Yes □ No
County Background check free of charge
Navajo Nation — District Court, cost is \$15.00 money order (only),
Monday, Wednesday, Friday (the first 25 participants in line)