

Office of the Pima County Attorney

Restorative Justice Adult Program (RJP) Volunteer Application

Email to: Emmanuelle.Fahey@pcao.pima.gov

It is the policy of the Pima County Attorney's Office to treat volunteers with the same consideration given to professionals. All information provided by you is *confidential* and will be used solely for the purpose of placement.

Contact Information:		
Full Name/Pronouns:		
Home address:		
Phone number:	Email address:	
Name of emergency contact person:	Relationship:	
Phone number:	Your date of birth	
Have you completed any of the following training Restorative justice training Circle Process training Nonviolent communication (NVC) training	gs in the past? (Check all that apply): Anti-racism/ anti-oppression training Mediation training Other (please indicate)	
Implicit bias training	☐ I have not completed any of these trainings	
If ves, please indicate the organization and the da		
If yes, please indicate the organization and the da Organization(s)-	Training(s) completed-	(date)

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What is your understanding of restorative justice, generally, and a circle process, specifically ("N/A" if none)?	
When are you available to volunteer? (Che	
Are you proficient in any languages in add If yes, list the languages and describe your	-
Hobbies/ special interests:	
Other Professional/Business/Volunteer affil	liations:
What concerns, if any, do you anticipate ab	pout doing this type of volunteer work?
	or, within the last two years, a misdemeanor that resulted in tion will not necessarily disqualify you). Yes No
	nd check conducted by Pima County Investigations Division?
If no, please explain:	
	est of my knowledge and belief, the information on this form is true and ements contained in this application. I understand that misrepresentation non-placement and/or dismissal.
Signature of Applicant	Date
Thank you for applyina to be a volunteer	with Pima County's RJC Program. We will be in contact with you soon.

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