



Keeping Our People Safe at The Salvation Army

A guide for volunteers

If you are interested in helping at The Salvation Army, there's a few trainings you'll have to do. These are vital to the safety of our program participants, volunteers, and staff.

1. Sign up to volunteer through Volgistics
 - a. Go to <https://www.volgistics.com/ex/portal.dll/ap?AP=1164206678>
 - b. OR, go to our website
<https://newjersey.salvationarmy.org/NewJersey/flemington>
 - i. Scroll down to Volunteer With Us: Individual click here to register
 - c. Fill out the form and submit it.
2. Background Check Form
 - a. Complete the background check form provided by The Salvation Army and return it to The Salvation Army 40 E. Main St. Flemington, NJ 08822.
3. KeepSAfe Training
 - a. Attend the KeepSAfe training provided at The Salvation Army
 - b. Sign the KeepSAfe Code of Conduct and KeepSAfe Social Media forms
4. Armatus Training – This is an online video tutorial. Once you are logged in and find the video, it should take about 15-30 mins
 - a. To Enroll:
 - i. Go to website.PraesidiumInc.com/enroll
 - ii. Enter the registration code: SAETNJD
 - iii. Fill out the form and click the link to enroll. Be sure to choose your correct location from the Organization drop down menu. (You will create the 4 digit password- it is not given to you)
 - iv. Print the page or write down your user login and password for future reference.
 - v. To begin taking training immediately, click the link or follow the instructions to the right to login later.
 - b. To Begin Training:
 - i. Go to website.PraesidiumInc.com/login
 - ii. Enter your user login and password. Then click Login.
 - iii. Click on the course image or title to begin.
 - iv. The required video for volunteers is **Abuse Risk Management for Volunteers**
 - v. Once you have completed the training, you may print a certificate for your records, and please notify The Salvation Army.

Contact Info: Lt. Adam Boynton – (908) 237-9008 – 40 E. Main St. Flemington NJ
adam.boynton@use.salvationarmy.org



**The Salvation Army
New Jersey Division
Applicant Release and Authorization Form**

I hereby authorize THE SALVATION ARMY or authorized representatives of the company bearing this release to obtain and release any information pertaining to my background including any of the searches noted below, for employment purposes. I hereby fully release and discharge The Salvation Army or other source providing information from all claims and damages arising out of or relating to any investigation of my background for said purposes. PLEASE PROVIDE 10 YEARS OF RESIDENTIAL HISTORY, ATTACHING ADDITIONAL PAGES IF NECESSARY.

SEARCHES: Social Security Trace | United States Sex Offender Registry | County Felony Misdemeanor

First Name		Middle Name	Last Name
Alias/Other		Social Security Number	
Date of Birth	Driver's License Number		State

Current Address		
City	State	Zip Code
County	Dates/ From- To	

1) Previous Address		
City	State	Zip Code
County	Dates/ From- To	

2) Previous Address		
City	State	Zip Code
County	Dates/ From- To	

Employee Signature: _____ **Date:** _____

*****THE REMAINING SECTIONS ARE TO BE COMPLETED BY SALVATION ARMY PERSONNEL ONLY*****

By signing below, I confirm that I have met and interviewed the above applicant for employment. The references they provided have been checked, the applicant has received a positive recommendation and there were no reports of misc

IMMEDIATE SALVATION ARMY SUPERVISOR	
Sign Name:	Print Name:
DATE REFERENCES CHECKED	CORPS/SERVICE UNIT
ADDITIONAL NOTES	