



Restoring Hope.
Transforming Lives.

Dear Intern Applicant,

Thank you for your interest in Interning at Mercy Multiplied. Review, complete, and submit the below items to be considered for an internship¹ opportunity.

Understand that Mercy Multiplied does not accept internship/practicum applications for meeting the requirements for a Counseling or Marriage & Family Therapy master's degree.

Mercy Multiplied is unable to provide housing and transportation for Interns. Please keep this in mind if you do not live where you'd be Interning.

Application Requirements:

1. Cover Letter
2. Intern Application
3. Resumé
4. Testimony
5. Reference Letter x1

Submit Application: **Please do not convert this PDF into a Word Document as this will change the format of the Application.** All Intern Applications are sent to Nashville's Community Relations Manager (CRM) at Mercy's Corporate Office, via email volunteer@mercymultiplied.com, even if you're wanting to intern in other Mercy Multiplied locations.

Application Review & Approval Process:

The below process will occur once you've submitted the Intern Application:

1. The CRM will review your Intern Application.
2. The CRM will reach out to other Mercy Staff/Departments to assess the need of an Intern.
3. Once a need is identified the Mercy Staff will contact the Applicant to schedule an interview².
4. Once approved to move forward with an Internship, Mercy's Human Resources is notified and will complete background checks while the Applicant completes their required Fingerprinting³.
5. Once all the background checks are cleared the Applicant can begin the Internship.

Feel free to call if you have any questions at 615-831-6987, Monday-Friday from 8-5pm CST.

We look forward in working with you!

Thank you,

A handwritten signature in blue ink that reads "Sandie Haskins".

Sandie Haskins
Nashville Community Relations Manager

¹ Mercy Multiplied internships are unpaid.

² Phone or in-person Interview

³ Applicants are responsible for costs associated with fingerprinting/background checks.

Mercy Multiplied: Intern Application

Name: _____ Date of Birth: _____

Address: _____

Phone Number: _____ Email Address: _____

How did you hear about Mercy Multiplied?

- Counselor
- Graduate/Formal Resident
- Hospital: _____
- Internet
- Mercy Event: _____
- Nancy Alcorn – Saw on TV
- Nancy Alcorn - Spoke at Church
- Nancy Alcorn – Spoke at Conference
- Program or Facility: _____
- School: _____
- Social Media – Facebook
- Social Media – Instagram
- Social Media – Other: _____
- Other: _____

Employment

Occupation: _____

Job Responsibilities: _____

Church Information

Name of Church: _____ Pastor Name: _____

Describe your church involvement: _____

Emergency Contact

Name: _____ Relationship: _____

Phone Number: _____

Prior History with Mercy Multiplied

Are you a Graduate or Former Resident of Mercy Multiplied? Yes No

Which Mercy Multiplied Home did you attend?

- Monroe Home
- Nashville Home
- Sacramento Home
- St. Louis Home

When did you enter the Home? _____

When did you exit the Home? _____

IMPORTANT: If yes, please contact Transitional Care at transitionalcare@mercymultiplied.com to discuss your application prior to submission.

Intern at a Mercy Multiplied Home

Mercy Multiplied does not accept internship/practicum applications for meeting the requirements for a Counseling or Marriage & Family Therapy master's degree.

Internships that occur in a Mercy Multiplied Home are only accepted when working with the Home's Community Relations Manager assisting with Mercy Events, Donor & Community Relationships, etc.

Which Mercy Multiplied location are you interested in:

- Monroe Community Relations Manager
- Nashville Community Relations Manager
- Sacramento Community Relations Manager
- St. Louis Community Relations Manager
- N/A

Intern at Mercy Multiplied's Corporate Office

Are you interested in interning at Mercy's Corporate Office? Yes No N/A

Please select your 1st, 2nd, and 3rd choice of departments you're interested in:

- | | |
|--------------------|--------------------------|
| _____ Accounting | _____ Outreach |
| _____ Treasury | _____ Adoptions |
| _____ Marketing | _____ Intake |
| _____ Development | _____ Transitional Care |
| _____ Mercy Events | _____ Program Data Entry |

Education

Are you a full-time student? Yes No N/A Expected Graduation Date: _____

School Requirements

Do you need internship hours as a school requirement? Yes No

If yes, please describe why you need internship hours? _____

How many total hours do you need? _____ How many hours per week? _____

What is the name of your school? _____

What is your field of study? _____

Do you need to be supervised by a Mercy Multiplied Staff with specific licensing and/or education requirements⁴?

Yes No

If yes, what is the requirement? _____

What is the name of your Field Coordinator/Professor: _____

What is your Field Coordinator/Professor E-mail: _____

What are the school's requirements for the Mercy Multiplied Staff who would supervise your Internship?

- Complete Field Profile
- Complete Field Instructor Profile
- Field Instructor Orientation
- Field Instructor's Resumé
- Weekly Time Sheets
- 1-2 Evaluations
- 1-2 Site Visits
- Other: _____

Intern Availability

When can you start interning? _____

How long do you plan and/or desire to intern? Week Month 1-3 Months 3-6 Months As Needed

Indicate the timeframes in which you're available to intern:

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning: 8-11am	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon: 12-5pm	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Disclaimer: Internship opportunities do not occur on the weekends.

⁴ For example, BSW Interns must be supervised by MSW/MSSW Mercy Multiplied Staff.

Reference Information

Reference Name: _____ Relationship: _____

Address: _____

Phone Number: _____ Email Address: _____

Disclaimer: The reference letter must be from a non-family member.

I am giving my consent for Mercy Multiplied Staff to contact the above Reference as listed within The Intern Application.

Supporting Documentation: Please have the individual submit a Reference Letter via volunteer@mercymultiplied.com

Criminal Record Inquiry

Have you ever been convicted of a felony, including a suspended sentence? Yes No

If yes, please describe:

Have you ever been under investigation for any sexual offense? Yes No

If yes, please describe:

Are you now or have you ever lived with someone who has been under investigation for any sexual offense?

Yes No

If yes, please describe:

Falsification of required information may subject the person to criminal prosecution.

It shall be unlawful for any person to falsify any information required on The Intern Application. Knowingly failing to disclose required information shall be deemed to be falsification to the same extent as providing false information.

Release Authorization for Background Investigation

I hereby acknowledge that as a condition of my Intern Application with Mercy Multiplied the organization may conduct any or all of the following investigative measures in regard to my Intern Application:

1. Obtain and review any or all investigative records for the purpose of verifying the accuracy of criminal violation information contained on my application, including but not limited to various federal, state, and other agencies, and Sex Offender Registry background checks.
2. My signature below authorizes that information is to be shared from Tennessee Department of Children's Services or California Department of Social Services to Mercy Multiplied (if applicable).

Legal Name (First, Last, Middle): _____

Maiden Name (if applicable): _____

Date of Birth: _____ Social Security Number: _____ - _____ - _____

Driver's License Number: _____ State: _____

Address: _____

Provide the addresses for previous residences in the last 10 years:

1st Address: _____

2nd Address: _____

3rd Address: _____

My signature below authorizes any and all the above investigative measures set out in items above.

Applicant Signature: _____

Confidentiality Agreement

Mercy Multiplied shall be required to hold in confidence all information related to ministry personnel, clients, personnel files, case files and the internal affairs of the ministry. Confidentiality is an integral part of the ministry and offers safety and privacy.

All board members, employees, volunteers/interns and contractors must sign a *Confidentiality Agreement* and exercise good judgment and care at all times to avoid unauthorized or improper disclosures of confidential information. Conversations in public places should be limited to matters that do not pertain to information of a sensitive or confidential nature. In addition, board members, employees and volunteers/interns should be sensitive to the risk of inadvertent disclosure and should refrain from leaving confidential information on desks or otherwise in plain view and refrain from the use of speaker phones to discuss confidential information if the conversation could be heard by unauthorized persons.

Any breach of confidentiality shall require disciplinary action up to and including termination of volunteering/interning.

At the end of a board member's term or upon the separation of an employee, volunteers/interns, or contractor, he/she will return all documents, papers, and other materials which may contain or be derived from confidential information and continue to observe the procedures protecting confidentiality.

All board members, employees, volunteers/interns and contractors must sign a *Confidentiality Agreement* honoring all ministry policies related to confidentiality.

Ministry personnel files and case records shall be housed in locked, fire-resistant files. Only authorized personnel shall have access to the files.

Information from ministry personnel files and client records shall never be shared without appropriate written authorization.

Information pertaining to ministry corporate operations shall never be shared without appropriate written authorization.

Confidentiality Infractions

Infractions of the above agreements are defined as being of two types:

Type 1 - Intentional & Serious: This is when a staff member knowingly and deliberately commits a breach of confidentiality. The commitment of Type 1 infraction will result in a discussion of the infraction between the staff member and immediate supervisor and a written reprimand entered into the staff member's personnel records. A serious infraction could be considered grounds for dismissal.

Type 2 - Unintentional & Moderate: This is when by carelessness, forgetfulness, or poor judgment a staff member places in jeopardy the confidential record of the ministry or information regarding a client. The commitment of a Type 2 infraction will be discussed with the staff member by his/her immediate supervisor and noted in writing in the staff member's personnel file. Repeated commitment of the Type 2 infraction could be considered grounds for dismissal.

Confidentiality Agreement (cont'd)

As a Mercy Multiplied Intern, I agree to:

- ✓ Protect the privacy of Current Residents, Former Residents, and Donors. By signing this document, I am agreeing to keep **ALL** information about these individuals confidential.
- ✓ Prepare records carefully, being accurate and professional.
- ✓ Physically safeguard records and other confidential materials by guarding them.
- ✓ Release confidential information from records only with express written permission of the resident and her parents/guardians.
- ✓ Guard against informal violations of confidentiality by being very discrete about what I discuss both within and outside of the ministry.
- ✓ Seek access only to the records with which I am professionally involved.
- ✓ Continue to observe the procedures protecting confidentiality after termination of my employment or end of my term or assignment.

I have read and understand the *Confidentiality Agreement* as presented above and agree to adhere to the guidelines set forth.

Additionally, I am aware that certain information pertaining to internal matters of the ministry should be maintained confidential. Sharing about ministry policies, newsworthy issues, and other sensitive information should be done with concern for the welfare of the ministry and in accordance with the *Confidentiality Agreement*.

I realize that a breach of confidentiality may be considered an act of gross misconduct and is subject to disciplinary action.

Intern Applicant Signature: _____

Non-Compete & Confidentiality Agreement

The Non-Compete & Confidentiality Agreement (“Agreement”) is by and between Mercy Multiplied America (“MMA”), a Tennessee Not For Profit Corporation, or Mercy Multiplied International (“MMI”), and _____ (“Intern”). It is agreed and understood between the parties that MMA is dedicated to carrying out its mission to provide opportunities for young women to experience God’s unconditional love, forgiveness, and life-transforming power, through Biblical principles. In order to fulfill its stated mission, MMA relies on the generosity of its charitable donors. The parties agree that MMA’s relationship with its donors is dependent upon the trust and confidence that the donors place in MMA. Any breach of that trust and confidence could cause MMA irreparable harm.

The Intern, evidenced by the Intern’s signature below, acknowledges that the restriction and covenants contained herein are reasonable as to geographic and temporal scope and that the Volunteer has received adequate consideration, for the restrictions set forth in this agreement, and that any breach or threatened or attempted breach of any provision of this agreement would cause irreparable harm to MMA, MMI, and its International affiliates, Mercy Multiplied et al (“MM”) and that MM shall be entitled, in addition to all other applicable remedies, to a temporary and permanent injunction and a decree for specific performance of the terms of this agreement without being required to prove damages or furnish any bond or other security. In addition, if the Volunteer violates the provisions of this Agreement by soliciting, then the Intern shall be liable to MM for an amount equal to the gross amount of charitable contributions received by MM from the solicited donor during the previous twelve (12) month period.

The non-prevailing party in any dispute arising under this agreement shall be obligated to pay all costs and expenses, including reasonable attorney’s fees, of the prevailing party.

The Intern agrees and acknowledges, evidenced by the Intern’s signatures below, that the Intern has had and shall have access to, or is aware of, certain confidential, restricted and/or proprietary information concerning MM. The Intern hereby undertakes and agrees that the Intern has a duty to MM to protect such information from use by or disclosure to third parties. The Intern agrees, during and after the term hereof, not to directly or indirectly, use, divulge, disclose or make accessible to any person, partnership, corporation, or other entity, or appropriate for the Intern’s own use, or the use of any other person, partnership, corporation or other entity, any information, data, figures, donor lists, fundraising strategies, including methods of using social media, tax records, information relating to MM’s operations, concepts, services, personnel history, or accounting procedures concerning MM that are not generally available to the public (“Confidential Information”). Intern agrees to maintain all such Confidential Information in strictest confidence and acknowledges and agrees that such information shall remain the sole and absolute property of MM, and that the Intern shall not maintain any personal copies thereof and all notes and summaries thereof prepared by either MM or Intern shall be returned promptly to MM.

Intern hereby agrees not to release any Confidential Information to any person, firm, corporation or other entity, either by statement, deposition, or as a witness, except upon express written authorization of the Executive Director or the Board of Directors of MM or as required by relevant principles of law or the order of a Court of competent jurisdiction. MM shall be entitled to an injunction to enjoin and restrain the unauthorized disclosure of Confidential Information.

The validity, construction and enforcement of this Agreement shall be determined according to the laws of Tennessee applicable to contracts executed and performed entirely within Tennessee, in which state this Agreement has been executed and is to be performed. Any claim for the enforcement of or arising from this Agreement shall be brought and maintained in the courts of Davidson County, Tennessee, and each Party hereto submits to the personal jurisdiction of such courts with respect to any such claim.

Non-Compete & Confidentiality Agreement (cont'd)

Should any provision of this Agreement be invalid or unenforceable for any reason, the remaining provisions hereof shall remain in full force and effect.

This Agreement has been jointly negotiated. The language of this Agreement shall be construed as a whole according to its fair meaning and not strictly for or against either Party. Each Party specifically waives the application of the common law doctrine that agreements are to be construed against the party who drafted the agreement.

This Agreement may be executed simultaneously in several counterparts, each of which shall be deemed an original, but all of which together shall constitute one and the same instrument. The copied or telecopied signature of a Party hereto shall be considered as if it was the original thereof.

The Parties have had an opportunity to read and review this Agreement and to consult with an attorney, if so desired.

Intern Applicant Signature: _____

Informed Consent

While interning at Mercy Multiplied, understand everything you work on and/or discuss with Staff is confidential between Mercy Multiplied America, Mercy Multiplied International, and you.

The exceptions to confidentiality as follows:

If any of following is suspected by any Staff member at Mercy Multiplied, we are mandated, by law, to report this to the proper authorities.

1. Abuse - If you are a minor (under 18 years of age), and you are being abused in either a physical, mental, or sexual way, Mercy Multiplied is required by law to report it to the local Child Protection Agency. Also, if you know of a minor being abused, we are required to report this to the local Child Protection Agency.
2. Suicide - If you have definite plans of killing yourself, Mercy Multiplied is required to report this to the appropriate authorities.
3. Homicide - If you have plans of killing someone or know plans of someone killing or attempting to kill another person, including you, Mercy Multiplied is required by law to report this to the appropriate authorities.

OR

Due to licensing standards, intern records are able to be reviewed by the appointed licensing representative at any given time, unless the records are outside of the state's statute of limitations. This is required by Tennessee Department of Children's Services or California Department of Social Services to ensure compliance with all state regulations.

Media Release Informed Consent

Mercy Multiplied often takes photographs and/or videos/DVDs of events at the Home, Corporate, or at offsite locations. There may be an occasion in which as an Intern you may have the opportunity to be photographed and/or recorded.

Review and sign the below *Media Release: Standard* if you're interested in participation.

Mercy Multiplied Media Release: Standard

I permit Mercy Multiplied as well as its parent companies, subsidiaries, assignees, and affiliated companies to record, own, publish, and republish information about me/my property and reproductions of my likeness and my voice and face for marketing and publicity purposes through any media.

I agree that the media footage may be edited and used, in whole or in part, in all media, including (but not limited to) marketing collateral; audio and video for social media outlets such as blogs, Twitter, Facebook and others; CD-ROMs; DVDs; Internet including the Mercy website, Vimeo, YouTube, and other video platforms; television, radio, and cable broadcasts; and for all other purposes in perpetuity throughout the world. I consent to the use of my name, likeness, voice, face, and biographical information in connection with the distribution and promotion of this media venue.

I expressly release Mercy Multiplied from any defamation and other claims I may have arising out of the above-described materials and hereby waive all rights to inspect and approve the finished product or its use. I acknowledge this release is firm and final and I sign this document to signify my agreement.

I allow Mercy to use the media in the way they choose.

I understand this release will expire upon written statements to Mercy Staff.

I have read this release, understand its contents and will keep a copy for my records.

Name

Signature of Individual

Date

E-mail

Phone

Address

Please check if you are a Mercy Multiplied Graduate or Former Resident.

Staff Use Only:

Media Release used for Specific Purpose: _____

MARKETING STAFF: (1) Scan/Save on Marketing Drive & (2) Scan/Email TC Manager

TC STAFF: (1) Scan/Save on TC ETO & (2) Scan/Email Marketing Staff

Revised: 5/1/19

Intern Questionnaire

Why do you want to Intern at Mercy Multiplied? _____

What specific skills and qualities would you bring as an Intern? _____

What skills and/or knowledge do you hope to gain while interning at Mercy Multiplied?

Intern Application Consent

By signing this Intern Application, I am stating that the information provided is true and correct to the best of my knowledge.

I agree to provide further information requested of me by Mercy Multiplied, and to work cooperatively with Mercy Multiplied toward an internship opportunity.

I agree to notify Mercy Multiplied if I wish to withdraw my Intern Application, or if the information contained herein changes significantly.

Intern Applicant Name: _____

Intern Applicant Signature: _____

Date: _____

Submit Application:

Submit the below items via email to volunteer@mercymultiplied.com

1. Cover Letter
2. Intern Application
3. Resumé
4. Testimony
5. Reference Letter x1

Disclaimer: All items must be submitted and approved in order to be considered for an Internship.