



**KEVIN BARTON**  
**WASHINGTON COUNTY DISTRICT ATTORNEY**

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**Victim Assistance Volunteer and Internship Program**

**Agency:** Washington County District Attorney's Office

**Office:** Victim Assistance Program

**Volunteer Program Coordinator:** (503) 846-8671, [DAVictim@co.washington.or.us](mailto:DAVictim@co.washington.or.us)

**Website:** [Washington County DA Volunteers and Interns Overview](#)

**Victim Assistance Program:**

The Victim Assistance Program is a team of crime victim advocates who assist victims through the criminal justice system. Advocates assist victims by providing general information about the criminal justice system, informing victims of their rights, notifying victims about court hearings, accompanying victims to grand jury and court hearings, assisting with restitution and Crime Victims' Compensation claims, and providing referrals to community resources. Advocates assist victims of all types of crimes, including sexual assault, domestic violence, homicide, harassment, child physical and sexual abuse, menacing, robbery, elder abuse, property crimes, identity theft, vehicular assaults, and violation of protective orders.

**About the Volunteer and Internship Program:**

The Victim Assistance Volunteer and Internship Program provides hands-on experience to students and community members interested in making a difference in their community and learning more about victim advocacy and the criminal justice system. Volunteers and interns work closely with victim assistance staff and deputy district attorneys to provide informational and emotional support to victims of all types of crime. Volunteers and interns gain important behind-the-scenes knowledge of the criminal justice system by supporting crime victims and assisting deputy district attorneys in carrying out the prosecutorial role. Volunteers can be students or community members and must make a one-year service commitment of 400 hours per year (equivalent to 8 hours per week). Annual Interns are current graduate/ undergraduate students and must commit to an 8-month minimum internship experience, with a minimum of 16 hours per week. Summer Interns are current students and must commit to a 6-month minimum internship experience, with a minimum of 16 hours per week. Interns are unpaid, and they can earn academic credit or fulfill course internship requirements with this internship. We are happy to provide professional references to volunteers and interns upon completion of the program.

**Expectations and Requirements:**

Volunteers and Interns must:

- Minimum age of 18 years old (17 years old to attend training)
- Complete criminal background screening
- Complete mandatory required 40-hour training, plus ongoing supplemental training

**WASHINGTON COUNTY DISTRICT ATTORNEY'S OFFICE- VICTIM ASSISTANCE PROGRAM**  
**Volunteer and Internship Program Application**

Full Legal Name: \_\_\_\_\_

Preferred Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Social Security #: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Address: \_\_\_\_\_

Mailing Address (if different): \_\_\_\_\_

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

Driver's License #: \_\_\_\_\_ State: \_\_\_\_\_ Expiration: \_\_\_\_\_

Do you have reliable transportation? Y N

Emergency Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Accommodations: \_\_\_\_\_

**PRESENT OR MOST RECENT EMPLOYMENT:**

Employer: \_\_\_\_\_ Supervisor: \_\_\_\_\_

City, State: \_\_\_\_\_ Phone: \_\_\_\_\_

Employed From: \_\_\_\_\_ To: \_\_\_\_\_ Your Job Title: \_\_\_\_\_

Job Duties: \_\_\_\_\_

May we contact the employer listed above? Y N

**PREVIOUS VOLUNTEER OR INTERN EXPERIENCE:**

Organization: \_\_\_\_\_ Supervisor: \_\_\_\_\_

City, State: \_\_\_\_\_ Phone: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_ Your Position Title: \_\_\_\_\_

Position Duties: \_\_\_\_\_

May we contact the supervisor listed above? Y N

**EDUCATION:**

<u>Name/Location</u>	<u>Course of Study</u>	<u>Dates Attended</u>	<u>Degree</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**GENERAL BACKGROUND:**

Are you fluent in any languages other than English? If yes, please specify language(s) and level of proficiency:

\_\_\_\_\_

Do you have other training or special skills you would like us to know about? \_\_\_\_\_

\_\_\_\_\_

What are your hobbies and favorite leisure activities? \_\_\_\_\_

\_\_\_\_\_

Have you ever been arrested or convicted of a crime? Y N If "yes" please explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever been under investigation of a crime (no including traffic violations)? Y N If "yes" please explain

\_\_\_\_\_

Have you ever been the victim of a crime? Y N If "yes" please explain: \_\_\_\_\_

\_\_\_\_\_

Has a family member ever been the victim of a crime? Y N If "yes" please explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever received services or support from any victim/survivor services organization (system or community based)? Y N If "yes" please explain: \_\_\_\_\_

\_\_\_\_\_

Have you previously applied to, worked or volunteered at a Victim Assistance Program? If so, where \_\_\_\_\_

\_\_\_\_\_

How did you learn about this volunteer opportunity? \_\_\_\_\_

Are you seeking to fulfill community service hours? Y N

Are you able to follow strict confidentiality procedures? Y N

What is your favorite group of people to work with? \_\_\_\_\_

Are you comfortable working with children? Y N

What is your availability? Please list days of the week and times of day. (WCDA Office Hours: M-F 8am-5pm)

M: \_\_\_\_\_ T: \_\_\_\_\_ W: \_\_\_\_\_ Th: \_\_\_\_\_ F: \_\_\_\_\_ Events/Wkds: \_\_\_\_\_

Are you able to commit to the minimum time commitment: Y N

- Volunteer (1 year; 8 hr/wk)                       Annual Intern (8 month; 16 hr/wk)                       Summer Intern (6 month; 16 hr/wk)

Are you available to attend mandatory required 40-hour training? Y N

- Summer/ Fall                       Winter/ Spring                       Spring/ Summer

Are you available to attend mandatory quarterly meetings? Y N

What type of criminal caseload interests you? Please mark all that apply.

- Domestic Violence                       Person Crimes  
 Child Abuse                       Property Crimes  
 Restitution Cases                       Sexual Violence (child or adult)

What volunteer/intern jobs are you most interested in? Please mark all that apply.

- Setting Up Case Files
- Trial Accompaniment
- Victim Contact Calls
- General Office Assistance
- Grand Jury Accompaniment
- Restitution Assistance
- Domestic Violence Team
- Child Abuse Team

**SUPPLEMENTAL QUESTIONS**

Please complete short answer questions on a separate sheet of paper. Answers do **not** need to be typed.

1. Why are you seeking a volunteer or intern position with the Victim Assistance Program?
2. What experience (if any) have you had with the criminal justice system?
3. What experience and skills can you contribute to the Victim Assistance Program? What are your strengths?
4. What do you hope to achieve through the volunteer/intern program with Victim Assistance?
5. We work with adult and child victims of sexual abuse, sexual assault, homicide and domestic violence. Would you have a hard time working with any of these populations? Are there any other situations in working with victims that would make you uncomfortable? Please elaborate.

**IF YOU ARE SEEKING AN INTERNSHIP (only intern applicants should fill out this section):**

Name of University/College: \_\_\_\_\_

Major: \_\_\_\_\_ Minor: \_\_\_\_\_ Level/Year: \_\_\_\_\_

Advisor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Department: \_\_\_\_\_ Class: \_\_\_\_\_

Why are you seeking an internship? \_\_\_\_\_

How many hours of practicum experience do you need to fulfill your class requirement? \_\_\_\_\_

For what length of time are you seeking to intern?  6 Months  8 months  1 Year  >1 Year

Are you obtaining your undergraduate degree or graduate degree? \_\_\_\_\_

Anticipated Internship Start Date: \_\_\_\_\_ Anticipated End Date: \_\_\_\_\_

**SUBMIT YOUR APPLICATION BY ONE OF THE FOLLOWING:**

**Mail:**

Washington County DA's Office  
Attn: Volunteer/Intern Coordinator  
150 N First Avenue  
Suite 300, MS 40  
Hillsboro, OR 97124-3002

**Fax:**

Attn: Volunteer Coordinator  
(503) 846-3407

**Email:**

[DAVictim@co.washington.or.us](mailto:DAVictim@co.washington.or.us)

**ALL APPLICANTS**

I understand that the District Attorney's Office will verify the information in my application and that failure to provide true and complete information is grounds for disqualification from participating in the Victim Assistance Volunteer and Intern Program.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date