VOLUNTEER APPLICATION

Name:	Telephone:	
Address:		
IN CASE OF EMERGE	NCY: Contact:	
Relationship:	Telephone:	
Frequency with which y	ou wish to volunteer: (mark preference)	
☐ Twice Weekly	☐ Weekly ☐ Every Two Weeks ☐ Longer Interval	\supset
Time preference: (mark	preference)	\setminus
☐ Morning	☐ Afternoon ☐ Evening ☐	
Lenath of time vou wish	n to serve: (mark preference)	
☐ 1 Hour	☐ 2 Hours ☐ 3 Hours ☐ Longer Periods	
Day of woods mustomed		
Day of week preferred:		
Do you wish to put a tir	ne limit on your volunteer commitment?	
☐ 3 Months	☐ 6 Months ☐ 1 Year ☐ Indefinite	
Can you volunteer trans	sportation for patient?	
Do you speak a foreign	language(s)? If yes, please list language(s):	
Have you ever had a fa	mily member or friend in a nursing home?	
Are there any skills dra	yn from previous experiences you would care to use in volunteer work (or	ther languages,
hobbies, work or volunt	eer experiences)?	

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Where do you wish to serve? (Please check your preferences)
☐ Show slides
☐ Show films
☐ Help with games
☐ Help with group sings
☐ Making patterns for projects
☐ Provide instrumental talent
☐ Provide vocal talent
☐ Help with parties
☐ Provide refreshments
☐ Friendly visiting
☐ Letter writing
☐ Helping in making and putting up decorations
☐ Taking residents for walks, rides, tours, or picnics
☐ Taking residents to church:
☐ With staff member
☐ Without staff member
☐ Helping to prepare for special days (Christmas, New Year's Eve, Halloween)
☐ Distribute magazines and books
☐ Play record player or read to residents
☐ Provide scrap materials for crafts
☐ Work with residents on a facility newspaper
☐ Teach painting
□ Watercolor
□ Oil
☐ Help resident to arrange flowers
☐ Work with resident in flower garden
☐ Assist residents with craft projects
☐ Help residents with writing exercises
☐ Prepare materials for residents' use
☐ Supplying activity director with new activity ideas
☐ Contacting people for book reviews, current events, group discussions, and talks (antiques, travel, movies, etc.)
☐ Help find projects for residents to contribute to the community (rolling bandages, addressing envelopes, etc.)
Additional comments:
APPLICANT PLEASE READ:

No question on this application is asked for the purpose of limiting or excluding any applicant's consideration for volunteer work because of his or her race, color, religion, sex, age, national origin or any disability of a qualified person.