



Volunteer Application

The information on this form is requested so that we may match your interests and skills with volunteer needs here at Reformed Presbyterian Home.

Name: _____
Last First Middle Initial

Address: _____
Street City State Zip

Phone: _____ Cell: _____

Email: _____

Best Time to Call: _____ Birthday: _____
Month Day

Employment/School Record:

Employer Name: _____

Employer Phone #: _____ Job Title: _____

Does your employer offer a volunteer donation matching program? _____

Name of School (if currently attending): _____

Is this required for school: _____ If yes, please explain: _____

General Information:

How did you hear about our program? _____

Why do you wish to serve as a volunteer? _____

Explain any previous volunteer experience: _____

Have you ever been convicted of a felony? _____ If yes, explain: _____

Skills and Experience:

List your special skills, interests, and hobbies: _____

Skills and Experience: Please check all that apply

- ___ Current CPR
- ___ Works well with people
- ___ Exercise / Fitness
- ___ Experience with the elderly
- ___ Computer/Technology skills
- ___ Creative ideas
- ___ Arts and Crafts
- ___ Musical Talent
- ___ Devotional Leader
- ___ Spiritual 1-1 visits
- ___ Clerical Skills

Emergency Contact information: Who would you like us to contact in an emergency?

Name _____ Relationship _____

Home Phone # _____ Cell Phone # _____

References: Please list two references:

Name: _____ Relationship: _____

Phone #: _____ Email: _____

Name: _____ Relationship: _____

Phone #: _____ Email: _____

Availability:

Time Available: _____ Daily Day/Time Preferred: _____

_____ Weekly Day/Time Preferred: _____

_____ Monthly Day/Time Preferred: _____

How long of a commitment are you prepared to make? _____

(3 months, 6 months, 1 year, ongoing)

Do you prefer to work with: *(circle one)*

Individuals

Groups

Please check any of the following areas of volunteer service that would be of interest to you:

- Friendly Visitor (one-on-one)
- Read to resident
- Write letter for resident
- Play game with resident
- Conversation partner
- Pet therapy
- Clerical/Office Tasks

- Devotional Leader
- Gardening, lawn work
- Provide pre-dinner music
- Assist craft activity
- Provide group entertainment
- Other (please specify): _____

Anything else you'd like us to know about you: _____

Minors ages 13-18 are required to fill out a parental permission form. Children under 13 years of age may not volunteer independently.

Please be aware that RP Home will perform a criminal background check on all new volunteers. Working with a vulnerable population makes this step necessary to ensure the safety of our residents and volunteers. This will be done at no cost to our volunteers.

I certify that all statements made by me on this application are true and complete to the best of my knowledge. I understand that any false statement, misrepresentation or omission may cause my dismissal from volunteer service.

Signature of Applicant: _____ Date: _____

Privacy: Please know that the privacy of our volunteers is very important to RP Home, and the information will not be shared with anyone beyond the Volunteers Services. The comfort of our volunteers is extremely important to RP Home, so please contact the Volunteer Coordinator with any questions regarding this procedure.