

VOLUNTEER APPLICATION FORM

Application Date: _____ Available/Start Date: _____

Name (first and last): _____

Home Address: _____

Phone: _____
Home Phone Cell/Alternate Phone

Email Address (if applicable): _____

Birth Date (required): _____

Social Security # (required): _____

Have you ever been employed at Aspirus Health? Yes No

Emergency Contact Information: In the event of an emergency, whom should we notify?

Name (first and last): _____ Relationship: _____

Phone: _____
Home Phone Cell/Alternate Phone

REFERENCES: Please list one NON-RELATIVE references.

Name (first and last): _____ Relationship: _____

Address: _____
Street/P.O. Box City State Zip

Phone: _____
Home Phone Cell/Alternate Phone

HOW DID YOU HEAR ABOUT OUR VOLUNTEER PROGRAM?

BUSINESS, PROFESSIONAL OR VOLUNTEERS EXPERIENCE:

Example: Computer skills, knitting, former RN, etc.

PLEASE LIST ANY SPECIAL SKILLS AND/OR HOBBIES:

Example: Foreign Language, Arts, Reading, etc.

AVAILABILITY (Check all that apply):

Mornings Afternoons _____ Specific Months
Monday Tuesday Wednesday Thursday Friday
Saturday Sunday

(OVER)

LOCATION PREFERENCE/WHERE DO YOU WANT TO VOLUNTEER (check ALL that apply):

Location	Volunteer Opportunity Preference
Aspirus Riverview	Home Delivered Meal Driver Hospital Escort VolunTeen Emergency Department Cancer Center
Aspirus Steven's Point	Hospital Escort VolunTeen Emergency Department Surgery Department
Aspirus Divine Savior	Tivoli - Activities Chaperone Hospital Escort VolunTeen Gift Shop Surgery Department Courtesy Cart/Mail Runner Knitter Home Care Lab Department Emergency Department Cookie Bake Sale
Aspirus Iron River	Gift Shop Outpatient Admin Support
Aspirus Eagle River	HELP Program Thrift Shop Pet Therapy
Aspirus Howard Young	Gift Shop HELP Program Spiritual Services Pet Therapy Auxiliary Admin Membership
Aspirus Keweenaw	Gift Shop Admin Support Hospital Escort/Info Desk Junior Volunteer
For Aspirus Wausau, Stanley, Tomahawk/Rhindlander, Ironwood, At Home Michigan, Langlade, Ontonagon, Merrill, and Medford	VOLUNTEER COORDINATOR WILL REACH OUT WITH OPPORTUNITIES

Age Specific Opportunities: Home Deliver Meals Driver - Must be 21 and older ; Emergency Department - Must be 16 and older; Hospital Escort - Must be 16 and older ; VolunTeen - Teenagers 16 and older ; Cancer Center - Must be 18 and older

I understand and agree that submitting this application form does not automatically register me as an Aspirus Volunteer and that there may be certain qualifications I must meet, including the acceptance of established volunteer policies and procedures, completion of background information disclosure form, and health screenings before I may begin volunteering. By signing this form, I attest that the information I have provided on this form is true and accurate. *If under 18 years old, please have parent/guardian signature.*

(Signature)

(Date)

(Parent/Guardian Signature)

(Date)

