

VOLUNTEER APPLICATION

Today's date: _____

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____ Cell: _____

E-mail address: _____

Birth Date: _____

Social Security Number: _____

Contact in Emergency:

Name: _____ Relationship: _____ Phone #: _____

Skills/Interests

Education Background: _____

Current Occupation: _____

Hobbies, Skills, Interests: _____

Previous Volunteer Experience: _____

Preferences in Volunteering

Is there a particular type of volunteer work in which you are interested? (Please check all that apply.)

- Ambulatory Care Unit
- Auxiliary Member/Auxiliary Board Member
- Friendly Visitor/Book Cart
- Cardiology/Radiology Unit
- Clerical/Filing/Support
- Computer Data Entry
- Diabetic Education Support
- Emergency Department
- Gift Shop Associate
- Information Desk/Receptionist
- Host/Hostess
- Medical/Surgical Unit
- Outpatient Service Assistant
- Shuttle Driver
- Transport/Escort

- Working one-on-one with an individual
- Working directly with medical staff office personnel
- Helping in an office with general administrative duties/filing, copying, etc.
- Working occasionally on group projects
- Bake Sales – Fall Bazaar / Spring Bake Sale
- Decorating for special events (banquets, special dinners, etc.)
- Other: _____

Are there groups with whom you are particularly interested in working? (Check all that apply.)

- Auxiliary
- Adults
- Staff
- Teens
- Children
- Seniors
- Other: _____

Are there groups with whom you would not feel comfortable working?

- No
- Yes _____

Availability:

- 8:00 am – 12 noon (mornings)
- 12 noon – 4:00 pm (afternoons)
- Gift Shop (variable shifts: 2 – 3 hours per shift)
- Other: _____

Please check the days you would be available to volunteer:

- Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Please list two non-family references we may contact:

Reference #1 Name: _____

Phone #: _____

Reference #2 Name: _____

Phone #: _____

How did you hear about the volunteer opportunities at OSF Saint James Medical Center?

Please be aware under the Health Care Worker Background Check Act, which went into effect January 1, 1996, OSF Saint James Medical Center is required to conduct a criminal background check on all volunteers, as well as candidates for all non-professional positions. Consequently, you may be subject to a criminal background check and you may be denied volunteer status if you have been convicted of certain crimes.