

VOLUNTEER APPLICATION

Name _____ Telephone number _____

Address _____

Do you have any previous volunteer experience? _____

Reference Contact: _____

Emergency Contact: _____

Time Preference _____

Day of Week Preferred _____

Frequency with which you wish to volunteer: _____

Are there any skills/hobbies you would like to share with the residents?

Areas of interest: Please circle.

Share musical talent

Lead sing along

Help with parties

Bingo / Cribbage / 500 / Scrabble / Wheel of Fortune / Dominoes / Bunko

Serve afternoon coffee

Assist with church services

Baking / Assist with breakfast group

Crafts / Decorating

Gardening

Hobby workshop

Men's group

Letter writing / cards

Visiting 1:1

Setting hair / Polish nails

Outings / Shopping at Wal Mart

Patio picnics

Reading to a group or individually

Share travel experience