

Volunteer Application



Services will typically be provided from 8:30 to 4:30, but there may be occasions when members need services at other times. Of course, everything is dependent on the availability of volunteers to provide services, which is why your participation is so important. Your times to serve are totally up to you. We thank you for printing, completing, and mailing this application to Box 1505, South Dennis, MA 02660.

Last Name: _____ First name: _____ Middle Initial: _____

Address: _____

Email: _____ Home Phone: _____ Cell Phone: _____

Preferred way to contact you: _____ Best time to contact you? _____

Male _____ Female _____ Fluent in other languages? _____

Do you have any pet or other allergies, which would prevent you from entering a member's home?

Yes: _____ No: _____ Allergy: _____

Are you willing to enter a smoker's home? Yes No

When are you available to provide services to members? This does not mean you will be volunteering all those times, as it is up to you each day whether you will provide a service or not. As your schedule changes, you can change your selections. It is most helpful to us if you **check** all times that you are available.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Mornings	___	___	___	___	___	___	___
Afternoons	___	___	___	___	___	___	___
Evenings	___	___	___	___	___	___	___

Which areas of service are you interested in providing?

- ___ Transportation (this is the most commonly used service)
- ___ Help around the home and garden (i.e., deadheading plants, changing storm to screen doors)
- ___ Companionship (includes friendly calling)
- ___ Technology support
- ___ Administrative Teams (includes Services Coordinator which can be done from your own home)

How did you hear about us? (Please circle)

Website From a Friend Print Material (i.e.: brochure/flyer) Social Media Other

Are you away for any extended periods of time during the year (i.e., winter in Florida)?

Yes _____ No _____ How many and which months: _____

Emergency Contact Information:

Name: _____ Phone: _____ Relationship: _____

Are you currently a member of any community organizations (including religious institutions) that may be interested in learning more about Bay to Sound Neighbors? If yes, please list organization, contact person, phone #.

Your Signature

Date

Next steps:

- 1) All not-for-profit organizations are required to do a CORI (Criminal Offender Record Information) check of their volunteers. You will be sent an application via e-mail that asks for permission for us to do that. Please complete and return within a week of receiving.
 - 2) You will be notified of the next Volunteer Training which you must complete before offering services. At that training you will be asked to sign a release of liability waiver and volunteer and confidentiality agreements.
 - 3) Please also give us a digital photo of a head shot of you for your I.D. Card. Send it attached to an email to baytosoundneighbors@gmail.com .
 - 4) If you are applying to be a volunteer driver, you will be asked to bring the following documents to the volunteer training: a copy of your driver's license, a copy of insurance first page showing \$100,000+ coverage, and printed photos of your inspection sticker and car registration.
- Thanks in advance for your cooperation

If you have any questions contact us at:

baytosoundneighbors@gmail.com or

- call 508-470-0585 or
- write to Box 1505, South Dennis, MA 02660