

RANCHO BERNARDO SENIOR SERVICE **OFFICE VOLUNTEER APPLICATION**

Date: _____ Home phone: () _____ Cell phone: () _____

Name: _____ E-mail Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Current and/or previous career/professional training:

Current and/or previous volunteer service:

Please let us know of special skills that you have (elder care, dealing with the public, accounting, nursing, notary, computer, public speaking, handyman/woman, etc.)

How would you rate the level of your computer skills? (None, I can type, I can do research on the internet, fairly high level, very high levels.) Please circle all that apply and/or expand on this below:

Our office volunteer shifts are from 9:00 a.m. to 12:00 p.m. and 12:00 p.m. to

3:00 p.m. Monday-Friday. We are closed on typical major holidays. Please check dates and shifts that you are available to volunteer.

Monday	9:00 a.m. - 12:00 p.m. _____	12:00 p.m. – 3:00 p.m. _____
Tuesday	9:00 a.m. - 12:00 p.m. _____	12:00 p.m. – 3:00 p.m. _____
Wednesday	9:00 a.m. - 12:00 p.m. _____	12:00 p.m. – 3:00 p.m. _____
Thursday	9:00 a.m. - 12:00 p.m. _____	12:00 p.m. – 3:00 p.m. _____
Friday	9:00 a.m. - 12:00 p.m. _____	12:00 p.m. – 3:00 p.m. _____

What is the frequency of your availability and willingness to volunteer?

I can be flexible about the frequency. _____

1 time per mo. _____

2 times per mo. _____

3 times per mo. _____

4 times per mo. _____

Must be no more than 1 time per week. _____

Prefer every other week. _____

Are you at times able to fit other days or shifts into your schedule if there is a need? Yes _____ No _____

Emergency contact name: _____ Relationship: _____

Emergency Contact Home Phone: () _____ Emergency Contact Cell Phone: () _____

Volunteer Signature: _____

Trained by: _____ Date: _____

Trained by: _____ Date: _____