VOLUNTEER APPLICATION PACKET INSTRUCTIONS

PLEASE READ ENTIRE INSTRUCTIONS!!

This is the **NEW** Volunteer Application packet. Please throw away all other volunteer application packets to **avoid confusion and use of the wrong packet**!!!

This is your MASTER COPY. Use it to make additional copies as needed of the packet.

After the volunteer has filled out the application, please utilize the area "For Office Use Only" and mark what type of volunteer the applicant is and if they are part of any program such as Work Source or SCSEP.

Program assistant – This volunteer is capable of counting money, answering phones, making deposits, cooking, opening and closing the center, etc. They may not perform all of the duties mentioned, but they are considered one of your primary volunteers and can be <u>counted_on for coverage in your absence</u>. This type of volunteer is someone you trust to run the place in your absence and could be left alone with the seniors. Additionally, they generally help with both programs as needed. Program assistants MUST receive all training for cash handling, food prep, food safety, emergency procedures, policy & procedures handbook training and site-specific instructions (how-to's).

Nutrition Only Volunteer- This volunteer helps with the Nutrition Program only. This type of volunteer usually works in the kitchen or assists with serving, etc. and they are not considered someone you would leave in charge during your absence.

Enrichment Only Volunteer - This volunteer helps with the Enrichment Program only. This type of volunteer works with the enrichment program but never for the nutrition program and they are not considered someone you would leave in charge during your absence.

Regular Program Volunteer - This volunteer helps with both programs. They are available to help in whichever program is needed. Additional training may be required depending on what position they are filling.

YOU ARE RESPONSIBEL FOR MAKING COPIES OF REQUIRED DOCUMENTATION (EXCEPT BACKGROUND CHECKS) AND ATTACHING IT TO THE VOLUNTEER APPLICATION BEFORE SENDING THE APPLICATION TO THE MAIN OFFICE. BACKGRAOUND CHECKS WILL BE DONE AT THE OFFICE. IF THERE IS A CONCERN WITH THE BACKGROUND CHECK, THE OFFICE WILL NOTIFY YOU.

AS THE SITE MANAGER, YOU ARE RESPONSIBLE FOR DECIDING IF YOU WANT THIS PERSON AS YOUR VOLUNTEER. SENDING THE APPLICATION TO THE OFFICE IS ONLY FOR RECORD RENTENTION, NOT DECISION MAKING.

PLEASE NOTE:

Work Source and SCSEP workers should have a background check already done by their program. Ask them to bring their background check with them on their first day. Make sure to get copies of any other documents such as food worker's cards, first aid cards, etc. DO NOT send volunteer packet until you are able to give the HIPPA training and can mark it on their application (for those required to take it – see application to determine if HIPPA is required). Include their test with the application for verification and certificate issuance.



Volunteer Code of Conduct

As a volunteer for Lewis County Seniors Non-profit Organization, you must agree to the following code of conduct:

1. Volunteers must show respect for other volunteers, program participants and staff at all times.

2. Volunteers must never misrepresent the Lewis County Seniors Non-Profit Organization, A Second Time Around Thrift Store or the Senior Centers in the communities.

3. When speaking with members of the community on behalf of Lewis County Seniors Non-Profit Organization to obtain donations, support, or provide outreach, you must obtain permission from the Lewis County Seniors' staff.

4. Volunteers have a responsibility to bring problems and concerns with senior program functions, staffing or other issues related to the senior programs to staff or Executive Director.

5. Volunteers are not responsible for dealing with staffing or other employee issues. Concerns and comments must be brought to the Executive Program Assistant, Store Manager or Executive Director.

6. Volunteers are not entitled to special treatment or perks that would require the program staff to bend the rules, or do anything that is against the program standards, program contracts, Lewis County Seniors' policies or state and federal laws.

7. Volunteers must accurately record time (hours) and mileage (if applicable), as required by the program.

Volunteer Name

Volunteer Signature Updated 12/18 Date



Volunteer Permission for Background Check

I hereby allow Lewis County Seniors Non-Profit Organization to perform a check on my background, including:

Criminal Record	YES/NO
Driving Record	YES/NO
Past Employment History	YES/NO
Past Volunteer Experience	YES/NO

As appropriate for the volunteer position(s) in which I expressed an interest.

I understand that I do not have to agree to this background check, but refusal to do so will exclude me from consideration as a Lewis County Seniors Non-Profit Organization volunteer.

This information is of a confidential nature and as such, will not be shared with other personnel except for those involved in this specific volunteer position. All information collected will be kept confidential.

Volunteer Name

Volunteer Signature Updated 12/18 Date

Lewis County Seniors Volunteer Application

For Office Use Only					
Type of Volunteer: Program Assist Nutrition Only Enrichment On Regular Progra	ant- <mark>Needs all documentatio</mark> Volunteer Ily Volunteer		Type of Program: SCSEP Work Source Student Support		
cleaning, other	neck Card documentation is not requ r duties not kitchen relate	d, etc. Howe	N/A in volunteer jobs such as dishwashing, general ver, having all documentation can be beneficial. before starting a volunteer for any position.		
(Firs	t, Middle Initial, Last) Please Print		DATE OF BIRTH:		
ADDRESS: City Phone: (Area Code	State) Phone Number	Zip	Do you currently have any of the following Documents or Training: First Aid Do you know CPR? HIPPA Training Valid Food Worker's Card		

GENERAL INFORMATION

EDUCATION/KNOWLEDGE/SKILLS

Occupation/Work Experience:_____

Volunteer Experience:

Updated: 12/18

Lewis County Seniors Volunteer Application

Special Training/Courses:

Please Indicate the type of volunteer work you are interested in:

Please Check all that Applies

Kitchen Help: Dishes Food Service Food Prep/Serv	ring	General Volunteer Help: Cleaning Minor Maintenance Landscape Maintenance Duties as assigned	
Office Help: Customer Servio Cash Handling Computer Work Filing EMERGENCY CONTACT:		Fundraising Help: After Hours Volunteering Weekend Volunteering Supply Pick-up/Drop-off	
	Name	Phone	√umber

Volunteers are not considered to be Lewis County Seniors Non-Profit employees for any purpose. Injury compensation will be provided by Washington State Department of Labor and Industries if an injury occurs during the performance of regular volunteer duties. The data furnished on this form is provided voluntarily and will only be used to contact, interview, and place volunteers in their assignments. Volunteers are expected to track all hours served on the volunteer hours record sheets provided. This is a requirement for volunteering with the Lewis County Seniors Non-Profit Organization and provides information for injury compensation, should that be necessary, and recognition of benefits.

I certify under penelty of purjury that the information included on this form is correct to the best of my knowledge. I further agree to allow the Lewis County Seniors or their authorized agent to verify any information contained in this document as needed, including a background check as required for volunteer services.

Signature<u>:</u>

Date: