**Volunteer Services**

Dear Adult Volunteer Applicant:

Thank you for your interest in our volunteer program. Volunteering can be a rewarding and fulfilling experience that will stay with you throughout your lifetime. There are a few things you should consider before completing your application.

1. Be certain that you are ready to make the minimum six-month commitment of one 4-hour shift per week to be a volunteer. Evaluate your current obligations to be sure this is a good time for you to commit. It is important that volunteers be dependable and treat their assignments seriously. If this is a good time for you to begin volunteering, please complete the attached volunteer application form and return it to our office.
2. Volunteer applicants will be sent an invitation to orientation as openings occur. This orientation will explain our volunteer program and educational requirements. A personal interview will then be scheduled to determine placement.
3. All volunteer applicants are required to have a Covid-19 vaccine, a current flu shot, complete a background check, TB testing and health screening.

Volunteer placement is contingent upon skills, previous work & volunteer experience, and available openings. Volunteering is a wonderful way to expand your horizons, help people, make new friends, and give to our community. We look forward to meeting you.

Sincerely,

Crystal Carter

Supervisor Operations, Volunteer Services

|  |  |
| --- | --- |
| Office Use Only | |
| Date | App. # |

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##### **ADULT VOLUNTEER APPLICATION**

#### **PERSONAL INFORMATION**

|  |  |  |
| --- | --- | --- |
| Name: | Email: | |
| Mailing Address: | | |
| City: | State: | Zip: |
| Home Phone: | Cell Phone: | |
| How did you hear about our Volunteer Program? | | |

#### **EDUCATION/BACKGROUND**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Years of formal education: | | Currently attending school? Yes  No  | | |
| School Name: | | | Year in school: | |
| Career Interest: | | | | |
| Club affiliations: | | | | |
| Special skills or interests: | | | | |
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#### **VOLUNTEERED/PAID WORK EXPERIENCE**

*List most recent position first*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| From | To | Employer | Job Duties | Reason for Leaving |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

#### **AVAILABILITY**

Please circle at least two days and shifts you are available

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Sunday** | 8-12 | 12-4 | 4-8 |  | **Thursday** | | 8-12 | 12-4 | 4-8 |
| **Monday** | 8-12 | 12-4 | 4-8 |  | **Friday** | | 8-12 | 12-4 | 4-8 |
| **Tuesday** | 8-12 | 12-4 | 4-8 |  | **Saturday** | | 8-12 | 12-4 | 4-8 |
| **Wednesday** | 8-12 | 12-4 | 4-8 |  | **Other:** | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| We offer both day and evening orientation, which do you prefer? Day  Evening  | | | | | | | | | |
|  | | | | | | | | | |

#### **EMERGENCY CONTACT**

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| --- |
| In an emergency we may contact: |
| Relationship to you: |
| Phone: |

#### **INTERESTS/GOALS**

|  |  |  |
| --- | --- | --- |
| Please explain why volunteering at PeaceHealth interests you, and what you hope to gain from the experience: | | |
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#### **AGREEMENT TO CONFIDENTIALITY / PHOTO RELEASE**

I understand that any information I may obtain directly or indirectly concerning patients, doctors, or personnel while I am a volunteer at PeaceHealth is confidential, and that this confidentiality is protected by federal law.

I authorize PeaceHealth to photograph me while performing services as a volunteer. These photos may be used for recruitment and recognition purposes only.

**Signature of applicant:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_

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INFORMATION

### VOLUNTEER SERVICES

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| --- | --- | --- |
| ***Volunteer Mission:***  Volunteers at PeaceHealth St. John are committed to providing patients and families the care and attention they deserve in a manner that strengthens PeaceHealth’s dedication to exceptional medicine and compassionate care.  ***Why Volunteer?***  Each year our volunteers donate approximately 40,000 hours of service to PeaceHealth. Among the many rewards is the satisfaction of being an integral part of a dedicated team, devoted to the health and well-being of our patients and guests. If you enjoy working with people or are thinking of a future in healthcare, volunteering at PeaceHealth is a great opportunity.  ***Who Volunteers?***  People of all backgrounds volunteer at PeaceHealth. Our volunteer team is composed a diverse group of people from 14 to over 90 years of age.  ***What are the Volunteer Opportunities?*** We have many volunteer opportunities thatprovide a vital service to our health care facility.Some areas available are: |  | ***Opportunities***  * Friends of St. John * Gift Shop * Information Desk * Lobby Volunteers * Spiritual Care * Activity Cart * Emergency Department * Nursing Floors   It is our goal to assign responsibilities to volunteers that are consistent with both their skills and interests. |

|  |  |  |
| --- | --- | --- |
| ***What Is the Time Commitment for***  ***Volunteering?***  We ask that adult volunteers make a minimum of six months, four hours per week commitment to their volunteer position. Teens are requested to make a minimum three-month commitment of four hours per week. Certainly, any volunteer who wishes to extend that commitment to a greater length of time is very welcome to do so.  Due to required training and time limitations, high school senior project opportunities are not available February through May.  ***What Services Can I Expect from the Volunteer Department?***   * Placement and skill building * Continuing education * Recognition * Support * Continuous evaluation and development of new opportunities * Friendships and meaningful experiences   ***What is Required to Become***  ***a Volunteer?***  Once you have returned your completed application to our office, we will plan for you to complete the following steps:   * Attend a volunteer orientation/education session * A personal interview * Background check * TB test (provided by PeaceHealth) * Covid-19 vaccine * Current flu shot   Excellent training and education will be provided to help you in your new job as a PeaceHealth Volunteer. You will also receive:   * A uniform * A schedule that fits your needs * A rewarding experience |  | ***PeaceHealth Mission and Core Values***  **MISSION**  We Carry on the healing mission of Jesus Christ by promoting personal and community health, relieving pain and suffering, and treating each person in a loving and caring way.  **CORE VALUES**  ***Respecting Individual Human Dignity and Worth***  We respect the dignity and appreciate the worth of each person as demonstrated by our compassion, caring, and acceptance of individual differences.  Stewardship  We choose to serve the community and hold ourselves accountable to exercise ethical and responsible stewardship in the allocation and utilization of human, financial and environmental resources.  Social Justice  We build and evaluate the structures of our organization and those of society to promote the just distribution of healthcare resources.  Collaboration  We value involvement, cooperation, and creativity of all who work together to promote the health of the community.  ***How Do I Get More Information?***  Contact:  Volunteer Services  PeaceHealth St. John  P.O. Box 3002  Longview, WA 98632  (360) 414-7506 or  (800) 438-7562, ext. 7506  [www.peacehealth.org/lowercolumbia](http://www.peacehealth.org/lowercolumbia)  2/21/23 |