

RIVERVIEW EATATES VOLUNTEER APPLICATION

For Internal Use Only: Date of Application: _____
Date of Orientation: _____
Assignment/Start Date: _____

Mail This Form to
Riverview Estates
303 Bank Avenue
Riverton, NJ 08077
(856) 829-2274

Name: _____ Phone Number: _____

Address: _____ City _____ State _____ Zip _____

Email: _____

Date of Birth: _____ Referred by: _____

How often would you like to Volunteer:

_____ Twice a week _____ Weekly _____ Every Two Wks. _____ Longer Intervals

What is your time preference?

_____ Morning _____ Afternoon _____ Evening

What is the length of time you wish to Volunteer?

_____ 1 hour _____ 2 hours _____ 3 hours

What day(s) of the week do you prefer?

Education or special training?

What languages do you speak?

Special Interestes _____

Please check all that apply:

_____ Reading to Residents _____ Music _____ Plants/Flowers _____ Letter Writing/Reading Mail
_____ Arts & Crafts _____ Escorts for walks, outings _____ One on One Visits _____ Entertainment
_____ Business Office filing _____ Holiday Helpers _____ transport to hair, therapy _____ outdoor clean ups

Do you have relatives or friends who are residents, employees, or volunteers at the Home?

Community affiliations _____

Do you have previous experience in volunteering? If so, please explain.

Are you able to push wheelchairs? Yes No

Are you fulfilling a community service requirement? If so, please explain.

In case of an emergency:

Contact person: _____ Phone Number: _____

Relationship to Volunteer _____

Physician's Name _____ Phone Number: _____

We are asking you to sign the Volunteer's Pledge as an acknowledgement of your understanding of your responsibilities.

Volunteer Pledge

As a Volunteer of Riverview Estates, I will be punctual and conscientious of fulfilling my duties. I will accept supervision graciously and conduct myself in a dignified manner. I will consider all information, which I may hear, read or become privy to as confidential. I will share my concerns or suggestions with the Activities/Volunteer Services Coordinator or designee.

I will uphold the traditions and standards of Riverview Estates and interpret them to the community.

I voluntarily give this institution the right to make a thorough investigation of my past employment or activities and agree to cooperate in such investigation and release from all liability or responsibility all persons, companies or corporations supplying such information.

Volunteer's signature _____ Date: _____

If required, signature of parent _____ Date: _____

Volunteer Coordinator _____ Date: _____

Director, Development _____ Date: _____