



## VOLUNTEER APPLICATION

### I. Personal Information

Full Legal Name: \_\_\_\_\_

What do you prefer to be called? \_\_\_\_\_

Street Address \_\_\_\_\_ ZIP Code \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Other) \_\_\_\_\_

E-mail: \_\_\_\_\_

What is generally the best way to reach you?    \_\_\_ Telephone \_\_\_ E-mail

Are you currently a member of the Village?    \_\_\_ Yes \_\_\_ No

If no, how did you hear about us? \_\_\_\_\_

Please list the names and complete contact info of two people (other than relatives) who have known you for at least two years:

1. Name \_\_\_\_\_

Relationship \_\_\_\_\_

Telephone number \_\_\_\_\_

E-mail \_\_\_\_\_

2. Name \_\_\_\_\_

Relationship \_\_\_\_\_

Telephone number \_\_\_\_\_

E-mail \_\_\_\_\_



**II. Employment Status**

\_\_\_ Employed \_\_\_ Full time \_\_\_ Part time Employer: \_\_\_\_\_

\_\_\_ Retired From: \_\_\_\_\_

Current/Former Occupation \_\_\_\_\_

\_\_\_ Student At: \_\_\_\_\_

Course of Study: \_\_\_\_\_

**III. Community/Civic Involvement**

Organization	Current Member	Current Volunteer
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____



#### IV. Skills and Interests

Have you ever worked with seniors?  No  Yes

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

Do you have any physical considerations that would affect the kinds of assignments you are comfortable with?  No  Yes

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

Do you have any allergies (including pet, smoke, or dust allergies) that would prevent you from entering a member's home?  No  Yes

If yes, please describe: \_\_\_\_\_  
\_\_\_\_\_

Which time commitment best describes your ability to assist the Village?

I would prefer to help with a variety of activities scheduled in advance 7 days or more

I would prefer consistent tasks on a set schedule

I would like to be "on call" to help as needed, and if I'm available, on short notice



#### IV. Skills and Interests, continued

Please indicate your interest areas. If something is of interest you feel you may lack the training or skills required, speak to the Village Executive Director as we may be able to provide the training.

Category	Service	Interest?	Comments/Questions?
Deliveries	Grocery Delivery	<input type="checkbox"/>	
	Meal Delivery	<input type="checkbox"/>	
	Other Delivery	<input type="checkbox"/>	
	Prescription Delivery	<input type="checkbox"/>	
Financial Services	Friendly Companion Note-taker	<input type="checkbox"/>	
Health Services	Friendly Companion note-taker	<input type="checkbox"/>	
	Friendly Companion Visits	<input type="checkbox"/>	
	Meal Hosting	<input type="checkbox"/>	
	Meal Preparation	<input type="checkbox"/>	
	Telephone Check-in	<input type="checkbox"/>	
	Walking Companion	<input type="checkbox"/>	
Home Services	Community Relocation Research	<input type="checkbox"/>	
	Friendly Companion Note-taker	<input type="checkbox"/>	
	Gardening	<input type="checkbox"/>	
	Handyman	<input type="checkbox"/>	
	Home Organization	<input type="checkbox"/>	
	Plumbing	<input type="checkbox"/>	
	Project Evaluation	<input type="checkbox"/>	
	Project Management	<input type="checkbox"/>	
	Technology-Home	<input type="checkbox"/>	
Legal Services	Friendly Companion Note-taker	<input type="checkbox"/>	
	Notary Public Service	<input type="checkbox"/>	
Personal Services	Personal Grooming Assistance	<input type="checkbox"/>	
	Pet Walking/Grooming	<input type="checkbox"/>	
	Reading to Visually Impaired	<input type="checkbox"/>	
	Technology-Mobile	<input type="checkbox"/>	



Category	Service	Interest?	Comments/Questions?
Public Agency Research	District Agency Research	<input type="checkbox"/>	
	Federal Agency Research	<input type="checkbox"/>	
Transportation	Air/Rail/Car/Other Bookings	<input type="checkbox"/>	
	Automobile Maintenance	<input type="checkbox"/>	
	Metro/Uber/Taxi Companion	<input type="checkbox"/>	
	Volunteer Driver	<input type="checkbox"/>	
Village Support	Activity Host	<input type="checkbox"/>	
	Classroom/Studio Instruction	<input type="checkbox"/>	
	General Administrative/Office	<input type="checkbox"/>	
	Development/Fundraising	<input type="checkbox"/>	
	Village Financial Advisor	<input type="checkbox"/>	
	Grant Researcher or Writer	<input type="checkbox"/>	
	Village Legal Advisor	<input type="checkbox"/>	
	Membership Advocate	<input type="checkbox"/>	
	Programming and Events	<input type="checkbox"/>	
	Provider of Professional Services	<input type="checkbox"/>	
	Telephone Coverage	<input type="checkbox"/>	
Telephone Tree	<input type="checkbox"/>		

**V. Driving (if you are not volunteering to drive, skip this section)**

Driver's License# \_\_\_\_\_ Jurisdiction \_\_\_ DC \_\_\_ VA \_\_\_ MD

Auto Insurance Carrier \_\_\_\_\_

Auto Insurance Policy# \_\_\_\_\_

Please initial your agreement:

\_\_\_\_\_ My vehicle is properly maintained, including regular safety checks

\_\_\_\_\_ My vehicle interior is clean and smoke-free

\_\_\_\_\_ My vehicle has operational safety devices, including seat and shoulder belts



## VI. Volunteer Background Checks

Due to sensitive nature of some of the work, the high level of service and expectations of Waterfront Village members, and our insurance coverage requirement, volunteers working with the Village are required to undergo a background check. For those offering to drive, there is an additional DMV check. The Village pays for these screenings and all results remain confidential. Declining the screening will affect what kinds of opportunities in which you may participate.

## VII. Volunteer Agreement

Please initial your agreement:

\_\_\_\_ I understand that the Village will check my references and conduct a background check that will include a criminal history record.

\_\_\_\_ I understand that if I have volunteered as a Village driver, there will also be a DMV check and I will need to present my Driver's License and proof of insurance to the Executive Director.

\_\_\_\_ To the best of my knowledge the above information is correct.

\_\_\_\_ I agree to maintain strict confidentiality in respecting the privacy rights of all direct and indirect participants with the Village.

\_\_\_\_ I am at least 18 years of age

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_

Complete and return to Waterfront Village, 800 Maine Ave. SW, Suite 200, Washington DC 20024-2811 or scan and email to: [info@dcwaterfrontvillage.org](mailto:info@dcwaterfrontvillage.org).