



## Argentium Volunteer Application

Date: \_\_\_\_\_ How did you hear about us? \_\_\_\_\_

Name: \_\_\_\_\_

Address \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Cell \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_

Email: \_\_\_\_\_

### Employment History

Are you currently employed? Y N

Current/Last Employer: \_\_\_\_\_

Briefly summarize your work experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

### Previous Volunteer Experience

Date	Organization	Type of Activity
_____	_____	_____
_____	_____	_____

\_\_\_\_\_

Do you have experience working with older adults? If yes, give a brief description of your activities:

\_\_\_\_\_  
\_\_\_\_\_

Why do you want to volunteer for Argentium Care? \_\_\_\_\_

\_\_\_\_\_

### References (List 2):

Name: \_\_\_\_\_ Phone/Email: \_\_\_\_\_ Relationship \_\_\_\_\_

Name: \_\_\_\_\_ Phone/Email: \_\_\_\_\_ Relationship \_\_\_\_\_

### Education (Check highest level):

HS Diploma HS GED BA/BS MS Other: \_\_\_\_\_

**Skills** (Check all that apply):

Word  Excel  PowerPoint  Outlook  Internet  Web Design   
Blog  Writing  Research  Event Planning  Social Media  Community Outreach   
Marketing  Photography/Videography   
Other: \_\_\_\_\_

Languages: \_\_\_\_\_

Hobbies/General Interests: \_\_\_\_\_

**Availability**

I am interested in volunteering: Weekly Monthly Special Events As Needed

Please list hours you are available on your preferred days.

Sunday \_\_\_\_\_ Thursday \_\_\_\_\_

Monday \_\_\_\_\_ Friday \_\_\_\_\_

Tuesday \_\_\_\_\_ Saturday \_\_\_\_\_

Wednesday \_\_\_\_\_

Are you a student? Y N Until what date will you be available? \_\_\_\_\_

**I am interested in a specific program:**

Best Day  Special Events  Ruby Slipper  Tapestry event  Office Help  Driver   
Senior Connections Visiting Volunteer  Well Being Calls/Friendly Caller  Music & Memory

**For Senior Connections Volunteers:**

Please check what you would be willing to do when you visit:

Shopping  Reading  Writing  Light chores  Going out for coffee   
Car ride  Going for a walk  Minor repairs  Cards/Board Games  Music

Other Activities? \_\_\_\_\_

**For Drivers:** For volunteers who wish to be drivers, a valid driver’s license and proof of current insurance must be submitted to Argentium Care.

In signing this application, I certify that all of the foregoing information is a complete and accurate statement of the facts and understand that if any misrepresentation, omission, or falsification be discovered, it will constitute grounds for dismissal. I hereby authorize Argentium to which I am applying, to conduct any investigation necessary concerning any part of my background related to the position I am seeking, including, but not limited to, the obtaining of a criminal background check. I authorize any of the persons or organizations named in this application to provide complete information and records regarding my employment, education, character and qualifications. I release all parties from any liability in connection with the provision and use of such information. Applicant Initials \_\_\_\_\_

**I have read and agree with the above.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_