

Office Use Only

Contact Date: _____ Completed Policies/Confidentiality Form: Completed Background Check:



Grace Center
For Adult Day Services

980 NW Spruce Avenue
Corvallis, OR 97330
Tel. 541-754-8417
Fax. 541-757-3571
gracecenter-corvallis.org

Volunteer Application

All New Volunteers are required to complete a Volunteer Application & Volunteer Policies/Confidentiality Agreement. The information listed below will be used to submit a background check; make sure to be thorough and accurate. When returning the application, please bring a government-issued photo ID. All volunteers must be at least 16 years of age and volunteers under the age of 18 require consent from a parent/guardian.

Last Name : First Name : Middle Name :

Date of Birth : Gender : (check one) Male Female Unknown/Not Specified Other Both

Social Security Number : (Optional) Prior Names and aliases :

Residential Address: City: State: Zip:

Mailing Address: (if different) City: State: Zip:

Phone Number: Phone type: (home, mobile etc.) 2nd Phone Number: Phone type: (home, mobile etc.)

Email Address:

During the last 5 years, have you been outside of Oregon for 60 days in a row or more? : Yes No
If yes, please list: city, state/country and years

City : (example: Seattle or Toronto) State or Country : (example: Washington or Canada) Years : (example: 2018-2019)

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Education/Training : Are you a student? Where? :

How did you hear about Grace Center? :

Why do you want to volunteer at Grace Center? :

Please list available days and times to volunteer :

Are you available to volunteer at least 1 hour per week for at least 10 weeks ? : Yes No
If no, explain schedule limitations :

Do you have any disabilities that need to be accommodated? If so, please explain :



Volunteer Interests

Check all that apply :

- | | |
|---|---|
| <input type="checkbox"/> Front Desk Greeter | <input type="checkbox"/> One-on-one companionship |
| <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon | <input type="checkbox"/> Games & Discussions |
| <input type="checkbox"/> Informational Presentations | <input type="checkbox"/> Music/Performing |
| <input type="checkbox"/> Arts & Crafts | <input type="checkbox"/> Knitting |
| <input type="checkbox"/> Sewing | <input type="checkbox"/> Weaving/Spinning |
| <input type="checkbox"/> Crocheting | <input type="checkbox"/> Gardening |
| <input type="checkbox"/> Exercise Activities | <input type="checkbox"/> Handy person |
| <input type="checkbox"/> Woodworking | <input type="checkbox"/> Fundraising Events |
| <input type="checkbox"/> Clerical/Computer | <input type="checkbox"/> Fragility Measures |

Please list any other special interests :



Volunteer Policies/Confidentiality Agreement

It is the philosophy of Grace Center that our volunteers are critical to its mission of providing the highest level of care to its clients and seeks to make your volunteer opportunities both gratifying and personally rewarding.

As a volunteer, I hereby understand and agree to the following :

- It is the policy of Grace Center to provide volunteer opportunities to all qualified persons without regard to race, creed, disability, color, religion, sexual orientation, national origin, age, gender, veteran status or another protected status in accordance with applicable law.
- All volunteers are expected to act responsibly to establish a pleasant environment free of discrimination
- Volunteers are expected to respect the privacy of participants and hold in confidence all information obtained in the course of volunteer service in accordance with current HIPPA (Health Insurance Portability and Accounting Act) regulations, whether information is obtained through staff consultation, written records or interaction with the person, family and/or friends.
- Volunteers are expected to accept responsibility for their own conduct.
- Volunteers are expected to comply with all safety and confidentiality rules, laws and regulations applicable to Grace Center.
- Volunteers should NOT stand on ladders or move heavy objects without assistance.
- Volunteers should not walk or transfer participants who need hands-on assistance and at NO time is a volunteer to assist a participant in the restroom. If unsure about a participant or situation, ask a staff member.
- Volunteers shall possess a professional attitude that upholds confidentiality and respect toward the people we serve, colleagues, applicants, and any sensitive situation arising within the facility.
- Volunteers must inform the Administrator immediately if they have witnessed anyone being disrespectful to participants. Certain conduct such as theft, fighting, falsification of records, threats of violence, harassing and intimidating others, and failure to cooperate with others is unacceptable at any time.
- Volunteers may NOT engage in solicitation or distribution of literature at Grace Center.
- Volunteers may NOT accept financial reimbursement or gifts from clients or their families/friends.
- Volunteers must NOT smoke on the premises of Grace Center, nor use drugs or alcohol.
- Volunteers are expected to report for duties unimpaired and in condition to perform their duties safely and efficiently.
- Volunteers will notify the Administrator of any performance-related side effects of any medically-authorized substances prior to beginning volunteer duties. Grace Center prohibits unlawful verbal, physical, or visual harassment of a sexual, racial, ethnic, age, religious, or disability-related nature. If a volunteer believes him/herself to be the subject of harassment, he/she is encouraged to bring the incident to the immediate attention of the Volunteer Coordinator.
- Volunteers must silence their cell phones and limit their use while volunteering.
- Volunteers who acquire communicable diseases such as the cold, flu, measles, or meningitis must notify the Administrator.
- Volunteers must notify Grace Center if unable to make a scheduled volunteer time.

I acknowledge and agree that I have carefully read this Agreement, that I fully understand the same, and that I freely and voluntarily execute the same. I also acknowledge and agree that any violation of this Policies and Confidentiality Agreement is a serious breach of my responsibilities and will result in severe consequences.

Signature of Volunteer :

Date :

Signature of Parent or Guardian (if under 18 years) :

Date :

Emergency contact :

Phone Number :

Please complete entire application and return to Grace Center for Adult Day Services via email or in person.