Office Use Only						
Contact Date: Cor	npleted Policies/Cor	fidentiality Form:	: Comple	ted Backgro	ound Check:	
Grace Center For Adult Day Services				Corv Tel.	980 NW Spruce Avenue Corvallis, OR 97330 Tel. 541-754-8417 Fax. 541-757-3571	
		er Applica			enter-corvallis.org	
All New Volunteers are required t Policies/Confidentiality Agreemer check; make sure to be thorough government-issued photo ID. All age of 18 require consent from a p	and accurate. Wher olunteers must be a parent/guardian.	returning the ap at least 16 years of	plication, pleas	se bring a teers under	the	
Last Name :	First Na	me :		Middle	Name :	
Date of Birth : Gender : (check one) Male Female Unknown/Not Specified Other Both Social Security Number : (Optional) Prior Names and aliases :						
			· · · · · ·	7:		
Residential Address:	City :	S	State:	Zip:		
Mailing Address: (if different)	City :	S	State:	Zip:	Zip:	
Phone Number: Phone ty	pe: (home, mobile e	etc.) 2nd Phone N	lumber: Ph	one type: (h	ome, mobile etc.)	
Email Address:						
During the last 5 years, have you If yes, please list: city, state/count		gon for 60 days ir	n a row or more	e? : Ye	es No	
City : (example: Seattle or Toronto) State or Country : (example: Washington or Canada) Years : (example: 2018-2019)						
City : (example: Seattle or Toronto)	State or Country : (example: Washington or Canada) Years : (example: 2018-2019)					
Education/Training : Are you a student? Where? :						
How did you hear about Grace C	enter?:					
Why do you want to volunteer at	Grace Center? :					
Please list available days and tim	es 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 accomm	nodated? If so, ple	ease explain :			



Volunteer Interests

Check all that apply :

Front Desk Greeter	One-on-one companionship		
Morning Afternoon	Games & Discussions		
Informational Presentations	Music/Performing		
Arts & Crafts	Knitting		
Sewing	Weaving/Spinning		
Crocheting	Gardening		
Exercise Activities	Handyperson		
Woodworking	Fundraising Events		
Clerical/Computer	Fragility Measures		

Please list any other special interests :



Volunteer Application

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 medicallyauthorized 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.