



# Volunteer Application

<b>Office Use:</b> <input type="radio"/> Accept <input type="radio"/> Reject
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**Thank you for your interest in volunteering! Please note the following important information as you apply:**

—When you complete this form and submit your Social Security Number, Verde Valley Caregivers Coalition (VVCC) shall complete a background check. For your protection, after the check is completed, your number is blacked out, like this: ██████.

—As a kind reminder, all interactions on behalf of VVCC need to be arranged through the main office. VVCC requests this so that in the unlikely event of an accident, insurance and liability policies can protect you and the neighbor served.

Name: \_\_\_\_\_ (Please Print)      Date of Birth: \_\_\_\_\_

Address, City, Zip: \_\_\_\_\_

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

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

Social Security Number: \_\_\_\_\_      Have you ever been accused of a felony?    Yes    No

Current Employer: \_\_\_\_\_

Former Occupation: \_\_\_\_\_

Personal Reference name, telephone, relationship: \_\_\_\_\_

**I am interested in volunteering for:**

- |  |  |
|--|--|
| <input type="checkbox"/> Call Center                               | <input type="checkbox"/> Shopping for neighbors  |
| <input type="checkbox"/> Transportation                            | <input type="checkbox"/> Shopping with neighbors |
| <input type="checkbox"/> Interviewing new neighbors                |  |
| <input type="checkbox"/> Guardian Angel Program                    |  |
| <input type="checkbox"/> Respite support                           |  |
| <input type="checkbox"/> Business Help                             |  |
| <input type="checkbox"/> Visiting neighbors                        |  |
| <input type="checkbox"/> Calling Neighbors                         |  |
| <input type="checkbox"/> Light Handy work requests                 |  |
| <input type="checkbox"/> Pet Assistance                            |  |
| <input type="checkbox"/> Patient Scribe                            |  |
| <input type="checkbox"/> Technology Help (phones, computers, etc.) |  |

**If Transporting, my vehicle is a:**

- Sports car
- Sedan
- SUV / Truck

**I'm willing to drive to:**

- Rimrock Area
- Camp Verde
- Clarkdale     Cornville
- Cottonwood    Jerome
- Sedona         VOC
- Flagstaff       Prescott
- Phoenix

**Days and times that I am available:**

\_\_\_\_\_

\_\_\_\_\_

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**How did you hear about us?**

\_\_\_\_\_

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\_\_\_\_\_

I authorize Verde Valley Caregivers Coalition to complete a background check. My commitment is for as long as I am able and/or willing to be a volunteer; I can suspend or resign when I feel the need. I understand that my volunteer work pertains to those neighbors to whom I am assigned; All the information on this form has been completed by the undersigned and is correct as of the date signed.

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