



APPLICATION FOR VOLUNTEER SERVICE

Individual and/or Organization

Please read instructions. This form, which should be filled out before the interview, will help us to better know you, your interests, and qualifications as a prospective volunteer. Please fill in every line unless it does not apply to your experience, in which case draw a line through the space so we will know this fact. (Note: individuals of an organization should complete an application prior to performing volunteer services.)

Once you have completed the application, please bring it with you to your Poydras Home interview. If you have any questions about the process, please contact Lynette Watler at 504-897-0535. Thank you for your interest and we look forward to meeting with you.

1. Name of Individual or Organization: _____
If organization, name of representative to contact: _____
2. Address: _____
Street City Zip Code
3. Telephone number(s): Home: _____ Business: _____ Cell: _____
4. Education: Grade School _____ College: _____ Business _____ Other _____
5. Have you ever done any volunteer work, and if so, where? _____

6. How much time can you give? _____
of hours Day of Week A.M./P.M. Weekends only
7. Name any societies, clubs, church, or organizations of which you are now a member: _____

8. List your particular interests, skills, and hobbies. (This might include certain games, dancing, music (instrumental or vocal), dramatics, hobbies (stamp collecting, sketching, etc., art and craft work, etc.): _____

IF ACCEPTED AS A POYDRAS HOME VOLUNTEER, I AGREE THAT:

1. I shall hold as absolutely confidential all information that I may obtain directly or indirectly concerning residents, doctors or personnel, and not seek to obtain confidential information from a resident.
2. My services are donated to the Poydras Home without contemplation of compensation or future employment, and given with humanitarian, religious or charitable reasons.
3. I shall not sell or attempt to sell goods or services, request contributions, or solicit persons to sign or distribute political petitions on Poydras Home premises, unless I receive the express authorization of the Executive Director to engage in these activities.
4. I shall be punctual and conscientious, conduct myself with dignity, courtesy and consideration of others, and endeavor to make my work professional in quality.
5. I shall attempt to resolve any problems related to my volunteer activities with my supervisor, and, if unsuccessful, attempt to resolve any such problems with the Executive Director.
6. I shall make my best effort to fulfill my commitment to the Poydras Home by completing all assignments that I accept.
7. I shall at all times uphold the philosophy and standards of the Poydras Home.
8. I understand that volunteer services of Poydras Home reserves the right to terminate my volunteer status as a result of (a) failure to comply with policies, rules and regulations; (b) absences without prior notification; (c) unsatisfactory attitude, work or appearance; or (d) any other circumstances which, in the judgment of the department director, would make my continued service as a volunteer contrary to the best interests of Poydras Home.

I have read each of the above conditions and I agree to be bound by them.

VOLUNTEER SIGNATURE

DATE

VOLUNTEER PARENT SIGNATURE

DATE

WITNESS CLAUSE

I agree that I have explained each of the conditions of volunteer services to the applicant who has signed this form and that I have witnessed the applicant's signature.

VOLUNTEER SERVICES SIGNATURE

DATE

