

# Volunteer Application & Enrollment Form



Personal Information			
Name			
Mailing Address			
City, State, Zip Code			
Mobile Phone		Alternate Phone	
Email Address		Preferred Contact Method	
Date of Birth		Preferred Pronouns	
How did you hear about volunteering with NORWESCAP?	<input type="checkbox"/> Flyer <input type="checkbox"/> Newspaper <input type="checkbox"/> Website <input type="checkbox"/> Other <input type="checkbox"/>		

## Insurance, Beneficiary, & Emergency Contact Information

Norwescap RSVP provides all volunteers age 55 and over with excess accident medical, personal and auto liability insurance coverage while performing volunteer activities, including commuting from your residence to a partner agency. To be qualified for this benefit you must agree to have Automobile Liability Insurance equal to the minimum limits required by the state where you reside. You must also agree to maintain a current and valid state issued driver's license. These volunteers are also eligible to receive a minimal death benefit through the RSVP program provided they designate a beneficiary.

Driver's License #		State Issued	
Auto Insurance Company		Policy #	
Beneficiary Name		Relationship	
Beneficiary Address			
City, State, Zip Code			
Phone		Alternate Phone	
Emergency Contact		Relationship	
Emergency Contact Phone		Alternate Phone	

## Availability

When are you available to volunteer? Please check all that apply:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							

How many hours do you anticipate volunteering per week?: \_\_\_\_\_ How many hours per day? \_\_\_\_\_

## Location

Which counties are you willing to serve? Please check all that apply:

<i>Hunterdon</i>		<i>Morris</i>		<i>Sussex</i>		<i>Passaic</i>		<i>Warren</i>	
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<b>Employment Information</b>			
<i>Current Employer or Retiree Affiliation</i>			
<i>Employer Address</i>			
<i>City, State, Zip Code</i>			
<i>Job Title</i>			
<i>Phone</i>		<i>Fax</i>	

**Placement Policy, Agreement, and Signature**

It is the policy of this organization to provide equal opportunities without regard to race, ethnicity, religion, sexual orientation, gender identify, age, or disability status. Thank you for completing this enrollment and for your interest in volunteering in your community. By signing this document, you attest that 1) the information submitted above is true and complete, 2) I understand that a background check may be necessary based on my volunteer activity, as well as references, and hereby agree to having a background check completed, and 3) I further understand that I am not an employee of Norwescap, the volunteer station, or the federal government and agree to serve without compensation.

*Volunteer Signature:* \_\_\_\_\_

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

*RSVP Director Signature:* \_\_\_\_\_

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

**FOR OFFICE USE ONLY**

ENROLLMENT DATE: \_\_\_\_\_

PLACEMENT: \_\_\_\_\_

# Volunteer Interest and Placement Form

Norwescap RSVP coordinates a number of signature programs designed to address specific community needs throughout northwest New Jersey. Some of these opportunities may be limited based on geographic area, season, or they may require training before placement. Please feel free to check any area that you may be interested in learning more about.

<b>Morris County</b>	<b>Sussex County</b>	<b>Warren County</b>
<p><b><u>Health Programming</u></b></p> <p><input type="checkbox"/> Osteoporosis education &amp; prevention</p> <p><input type="checkbox"/> Fall prevention education</p> <p><input type="checkbox"/> Chronic disease self-management</p> <p><input type="checkbox"/> Increase mobility</p> <p><b><u>Socialization &amp; In-Home Assistance</u></b></p> <p><input type="checkbox"/> Be a friendly visitor</p> <p><input type="checkbox"/> Assist with money management</p> <p><input type="checkbox"/> Make checkup calls</p> <p><input type="checkbox"/> Grocery Shopping</p> <p><b><u>Provide Economic Opportunity</u></b></p> <p><input type="checkbox"/> Teach financial literacy courses</p> <p><b><u>Tax Preparation for Individuals with Limited Income</u></b></p> <p><input type="checkbox"/> Be a volunteer tax preparer</p> <p><input type="checkbox"/> Be a greeter</p> <p><input type="checkbox"/> Schedule appointments</p> <p><input type="checkbox"/> Provide office support</p> <p><b><u>Capacity Building</u></b></p> <p><input type="checkbox"/> Food pantry support</p> <p><input type="checkbox"/> Board member/committee chair</p>	<p><b><u>Tax Preparation for Individuals with Limited Income</u></b></p> <p><input type="checkbox"/> Be a volunteer tax preparer</p> <p><input type="checkbox"/> Be a greeter</p> <p><input type="checkbox"/> Schedule appointments</p> <p><input type="checkbox"/> Provide office support</p> <p><b><u>Capacity Building</u></b></p> <p><input type="checkbox"/> Food pantry support</p> <p><input type="checkbox"/> Board member/committee chair</p> <p><input type="checkbox"/> Manage, recruit, or train other volunteers</p> <p><b><u>Child and Family Resource Services (CFRS)</u></b></p> <p><input type="checkbox"/> Diaper Bank Project</p> <p><input type="checkbox"/> Family Engagement Volunteer</p> <p><b><u>Pathways to Prosperity</u></b></p> <p><input type="checkbox"/> Peer Mentor/Tutor</p> <p><b><u>Other Volunteer Opportunities</u></b></p> <p><input type="checkbox"/> Tell me about other opportunities within my county</p>	<p><b><u>Tax Preparation for Individuals with Limited Income</u></b></p> <p><input type="checkbox"/> Be a volunteer tax preparer</p> <p><input type="checkbox"/> Be a greeter</p> <p><input type="checkbox"/> Schedule appointments</p> <p><input type="checkbox"/> Provide office support</p> <p><b><u>Cancer Education &amp; Early Detection Program (CEED)</u></b></p> <p><input type="checkbox"/> Cancer Event Team</p> <p><input type="checkbox"/> Office Support</p> <p><input type="checkbox"/> Volunteer Event Coordinator</p> <p><b><u>Career and Life Transition Center</u></b></p> <p><input type="checkbox"/> Employment coach assistant</p> <p><b><u>Child and Family Resource Services (CFRS)</u></b></p> <p><input type="checkbox"/> Family Engagement Volunteer</p> <p><b><u>Family Success Center</u></b></p> <p><input type="checkbox"/> Activity Leader</p> <p><input type="checkbox"/> Office Support</p> <p><input type="checkbox"/> Secretary/Administrative Assistant</p> <p><input type="checkbox"/> Tutor</p> <p><b><u>Financial Empowerment Centers</u></b></p> <p><input type="checkbox"/> Financial Educator</p> <p><input type="checkbox"/> Office Support</p>

Manage, recruit, or train other volunteers

**Assist with Healthcare Decisions**

Counsel Medicare beneficiaries

Provide Medicare education and information

Educate & counsel on healthcare fraud awareness

Tell me about other opportunities within my county

**Food Bank**

Distribution Driver

Financial Data Entry

Food Sorting

Thrift Store

**Housing and Energy**

Office Support

**Capacity Building**

Board member/committee chair

Manage, recruit, or train other volunteers

**Tax Preparation for Individuals with Limited Income**

Be a volunteer tax preparer

Be a greeter

Schedule appointments

Provide office support

**Provide Economic Opportunity**

Teach financial literacy courses

**WIC (Women, Infants, & Children)**

Office Support

**Other Volunteer Opportunities**

Tell me about other opportunities within my county

Hunterdon County	Passaic County
<p><b><u>Career and Life Transition Center</u></b></p> <p><input type="checkbox"/> Employment coach assistant</p> <p><b><u>Child and Family Resource Services</u></b></p> <p><input type="checkbox"/> Family engagement volunteer</p> <p><b><u>Capacity Building</u></b></p> <p><input type="checkbox"/> Board member/committee chair</p> <p><b><u>Hunterdon Helpline</u></b></p> <p><input type="checkbox"/> Friendly visitor</p> <p><input type="checkbox"/> Telephone reassurance caller</p> <p><input type="checkbox"/> Volunteer shopper</p> <p><b><u>Other Volunteer Opprtunities</u></b></p> <p><input type="checkbox"/> Tell me about other opportunities within my county</p>	<p><b><u>Other Volunteer Opprtunities</u></b></p> <p><input type="checkbox"/> Tell me about other opportunities within my county</p>

Do you have any special populations that you wish to work with?

Elderly / Senior Citizens		Youth / Children		Individuals with Disabilities	
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**Special Skills and/or Qualifications**

Summarize any special skills and/or qualifications that you think may be useful in your volunteer assignment and/or any past volunteer experience.