



If applicant is under the age of 18, parent/guardian permission is required. Parent/guardian acknowledges his/her child will be working in a Hospice setting where patients reside or are admitted to a facility for palliative management of symptoms associated with a terminal diagnoses.

Parent or Guardian Signature _____

Date _____

Volunteer Application

Patient Care

Office

Bereavement

Name: _____ Phone: _____

Address: _____
Street Apt # City State Zip

Birth Date: _____ E-mail: _____
mo day year

Cell Phone: _____

Employer: _____

Address: _____

Phone: _____

Please circle one:

Can you receive calls at work? YES NO EMERGENCY ONLY

Person to contact in case of an emergency:

Name: _____ Phone: _____
day evening

Work Experience/Volunteer Experience/License _____

Educational Background _____

Interests, hobbies, skills, previous volunteer experiences, languages, office skills _____

Why do you want to be a hospice volunteer? _____

Describe your general health over the last year, be sure to include any restrictions you wish us to know about (no lifting, no smoking, etc.) _____

Do you have a valid Driver's License? If yes, number & state: _____

Auto insurance liability coverage? If yes, name of carrier: _____

Have you ever been convicted of a felony? (a yes answer does not necessarily exclude you from becoming an Inspiration Hospice volunteer) If yes, please explain: _____

How did you hear about the Inspiration volunteer program? _____

Have you experienced the death of someone close to you within the last year? If yes, please give date and explanation of loss. _____

Any additional comments or information you would like to share? _____

References (excluding family) *All references must be verified prior to commencement of volunteer work.*

Name: _____ Phone: _____

Address: _____

Name: _____ Phone: _____

Address: _____

I authorize a representative of Inspiration Hospice to check my references.

Date: _____

Name: _____ Signature: _____

Please Print

Parent/Guardian permission, if applicable: _____

**Call today to schedule an interview with our Volunteer Coordinator, who will explain more about the application process, discuss the range of opportunities and advise you of the dates of our next training sessions.
Call: 1-800-593-1317.**