



Companion Volunteer Application

Name of applicant

Mailing address

Physical address (if different than mailing)

Email address

Preferred phone

text ok Alt phone

text ok

Emergency contact information

Name

Relationship to you

Address

Phone

Email

Your employer

Occupation

Work phone

Okay to call you at work?

Yes

No

Emergency only

The following information is required for background check

Social Security Number

Additional addresses - other than your current address - where you've lived within the last five years (if any)

Aliases used (i.e. maiden name)

Two **personal references** (*not family members*) Please provide complete mailing address, as references may be verified by phone or mail.

Name

Phone

Address

How do you know this person?

Number of years known

Name

Phone

Address

How do you know this person?

Number of years known

Would you consider volunteering on a weekend? Yes No

Notes:

Would you consider volunteering in the evening? Yes No

Notes:

In which months are you available to volunteer?_

Year –round	January	February	March	April	May	June
July	August	September	October	November	December	

In which geographic areas are you willing to volunteer?

City of Grand Marais	Gunflint Trail	West End (Lutsen/Tofte/Schroeder)
East End (Croftville/Hovland)	Grand Portage	

Do you have any physical restrictions? (i.e. weight bearing limits, mobility issues, etc.)

Are you a U.S. Veteran? Yes—Branch: No

Do you know a language other than English? Yes—Language: No

Education/special training

Previous volunteer experience

Previous experience with older adults

What personal qualities/strengths will you bring to your volunteer work with older adults?

Other interests/hobbies/skills:

Please briefly describe any experiences you have with:

Providing care to someone who was dying or had a chronic illness

Being present with someone at the time of their death

Assisting/working with someone with dementia

Would you be willing to visit in a home with pets? Yes No Other

In what ways would you be willing to meet with your companion?

Face to face in companion's home Telephone call Take companion for a car ride Go for a walk

Accompany companion on errand or outing Other

CODE OF ETHICS FOR VOLUNTEERS

As a volunteer, I realize that I am subject to a code of ethics similar to that which binds professionals in the field in which I work. I, like them, assume certain responsibilities and expect to account for what I do in terms of what is expected of me. I understand that any information that is disclosed to me while assisting Care Partners is confidential. I interpret "volunteer" to mean that I have agreed to work without compensation in money. If I am accepted as a volunteer worker, I expect to do my work according to the standards set forth in the Care Partners volunteer training materials and to follow all Care Partners policies and procedures.