

Volunteer Information/Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Occupation: _____

Any Health Limitation: _____

Reason for wishing to do volunteer work: _____

Volunteer Experience: _____

Have you ever been employed and/or volunteered at Grace Lutheran Foundation-American Lutheran Homes-Autumn Village? No ____ If yes, give dates and locations _____

Have you lived outside of Wisconsin within the last three years? No ____ If yes, give dates and locations _____

EMPLOYMENT RECORD

List your past three employers. **List most recent position first.**

Employer _____ Supervisor _____

Address _____ Telephone _____

Employed from _____ to _____ Job Title _____

Description of duties _____

|||||

Employer _____ Supervisor _____

Address _____ Telephone _____

Employed from _____ to _____ Job Title _____

Description of duties _____

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Employer _____ Supervisor _____

Address _____ Telephone _____

Employed from _____ to _____ Job Title _____

Description of duties _____

Schedule Preference:

Morning Afternoon Evening

Monday Tuesday Wednesday

Thursday Friday Saturday Sunday

Volunteer Activities of Possible Interest:

Assist with Group Programs

- Arts and Crafts
- Reminiscing
- Exercise Group
- Koinonia
- Table Games
- Chapel
- Monthly Birthday Party
- Special Events
- Let's Talk – Discussion Group
- Bus Outings
- Bible Study
- Trivia
- Bingo
- Baking Group
- Current Events Group

Independently Lead

- Cards (500, Cribbage, other)
- Presentations
- Men's Club
- Women's Club
- Musical Performances
- Rosary

Provide 1:1 Visits

- Conventional Visit
- Letter Writing/Reading
- Current Events
- Reminiscing
- Table Games/Cards
- Reading Aloud
- Sensory Stimulation

Other

- Deliver Mail
- Create Wall Calendars
- Make door Decoration
- Seasonal Decorating

Hobbies/Skills

Emergency Contact:

Name: _____ Relationship: _____

Phone: _____

Volunteer Signature: _____ Date: _____

Parent/Guardian: (if under 18) _____