

# HOUSTON HEALTHCARE VOLUNTEER APPLICATION

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

Name: \_\_\_\_\_ Spouse: \_\_\_\_\_

Street: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ Birth date: \_\_\_\_\_

Occupation: \_\_\_\_\_ Years: \_\_\_\_\_

Business/School Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Education: high school ( ) college ( ) professional/ vocational ( )

Major: \_\_\_\_\_ Foreign language skill: \_\_\_\_\_

\*If so, are you willing to interpret if needed Yes/No

Do you have any volunteer experience? Yes / No describe \_\_\_\_\_

Have you ever worked in a healthcare facility before? Yes/ No If so where? \_\_\_\_\_

Community Affiliations: \_\_\_\_\_

Hobbies / Interests: \_\_\_\_\_

Skills: (clerical, sales, etc.) \_\_\_\_\_

Why would you choose to be a healthcare volunteer? \_\_\_\_\_

Are there job functions you will not be able to perform? \_\_\_\_\_

Shift availability: a.m. ( ) p.m. ( ) evenings ( ) weekends ( )

In emergency notify: \_\_\_\_\_ phone: \_\_\_\_\_

Relation: \_\_\_\_\_

Personal physician: \_\_\_\_\_ phone: \_\_\_\_\_

In the last five years, have you been convicted of a felony other than traffic violation? \_\_\_\_\_

If so, please explain: \_\_\_\_\_

I hereby certify that all answers given by me on this application are true to the best of my knowledge. I authorize Houston Healthcare to contact personal references and personal physician whom I have listed on this application for the purpose of acquiring information about me. I release Houston Healthcare from any liability based on such release.

If accepted as a volunteer, I pledge to hold in strict confidence all personal and official matters, which come to my attention. It is my responsibility to respect and preserve the privacy of patients as well as any details of care involved.

Signature \_\_\_\_\_ Date \_\_\_\_\_

(For office use):

Date of initial interview \_\_\_\_\_

Orientation completed: \_\_\_\_\_

By: \_\_\_\_\_

**Please complete and return to:**

**Houston Healthcare  
Volunteer Services  
1601 Watson Blvd  
Warner Robins, Ga 31093**