

Mountain Hospice Volunteer Areas of Interest

Name: _____

Date: _____

Areas of interest – circle all that apply...

1. Visiting patients
2. Baking
3. Sewing
4. Scrap-booking
5. Visiting patients with your dog (must be a certified therapy dog)
6. Care calls (calling to say hello to patients)
7. Special events (fundraisers, parades, marketing events)
8. Computer work (Excel, Word, PowerPoint)
9. Sunshine Club (sending cards to patients on birthday and holidays)
10. Assisting with group activities (nursing homes, senior centers)
11. Gardening / yard work
12. Patient errands (shopping / library)
13. Reading to patients
14. Burning CDs for patients (free sites – we supply CDs)
15. Taking monthly blood pressures at various sites in town (must commit)
16. Willing to travel... up to 10 miles, 20 miles, 30 miles (circle one)

MOUNTAIN HOSPICE, INC VOLUNTEER APPLICATION FORM

PLEASE PRINT OR TYPE

Name _____
Last First Middle

Address _____

Phone _____ E-mail _____

Birthday _____ Are you a veteran? Yes No

Where do you work / study? _____

Education (circle last year completed):

Grade 5 6 7 8

College 1 2 3 4

High School 9 10 11 12

Graduate 1 2 3 4

Previous volunteer experience (please specify): _____

Special training, skills, or interests _____

Times available for volunteer work _____

Can you provide your own transportation? _____

Do you have any physical limitation or disabilities? If so please specify : _____

Please List Three (3) References:

Name _____

Address _____

Phone _____

MOUNTAIN HOSPICE, INC.

1002 S Crim Avenue

Belington, WV 26250

(304)823-3922

Signature

Date