



# Volunteer Application

<b>Office Use Only</b>
Route _____
Day _____
Other _____

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

E-Mail \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender M F Status Single Married

Place of Employment \_\_\_\_\_

Organization Affiliation \_\_\_\_\_

How did you find out about Meals on Wheels? \_\_\_\_\_

## Emergency Information

Emergency Contact \_\_\_\_\_

Relationship \_\_\_\_\_ Phone (H) \_\_\_\_\_ (W) \_\_\_\_\_

## References (Please list 2)

Name	Address	Phone
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Name	Address	Phone
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## Are you interested in:

- Driving a route\* (Drivers license required and confirmed insurance)
- Flower delivery for fundraisers
- Packing Meals/Packing Milk for Van delivery
- Food Rescue from grocery stores
- Office Volunteer
- Newsletter Collating
- Angels on wheels (provide transportation to doctor appointments)

## **WASI's Code of Ethics**

As a volunteer, I realize that I am subject to a code of ethics similar to that which binds the professional in the field which I work. I, as a volunteer, will perform my service to the best of my ability, maintaining the recipient's interests as my primary focus. I will try my best to treat recipients with a non-judgmental approach, ensuring that they are accorded equality, respect, and dignity in all dealings, regardless of their age, gender, disability, or any other attributes which identifies who they are as an individual. I will respect the confidentiality of the recipients I serve.

**Volunteer's Signature** \_\_\_\_\_

**Signature of Director** \_\_\_\_\_