

# VOLUNTEER CENTER *for* COWLITZ-WAHKIAKUM

## RSVP

### Lead With Experience

## Volunteer Enrollment Application

Please Print Legibly

1526 Commerce, Longview WA 98632  
360-425-3430 Fax: 425-8724  
lowercolumbiacap.org



Name \_\_\_\_\_ Phone \_\_\_\_\_ Cell \_\_\_\_\_

Mailing Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Email \_\_\_\_\_ Birth date \_\_\_\_\_ Male \_\_\_ Female \_\_\_

Emergency contact \_\_\_\_\_ Phone \_\_\_\_\_

Beneficiary Name\* \_\_\_\_\_ Address \_\_\_\_\_

*\*Beneficiary Information is required for applicants 55 or older (Volunteers Insurance purposes)*

If Bilingual, what language(s) do you speak? \_\_\_\_\_

Education/Training/Skills \_\_\_\_\_

Employment Experience \_\_\_\_\_

If currently volunteering, please provide details \_\_\_\_\_

Do you have physical/medical limitations? \_\_\_\_\_

### Insurance Information

**RSVP (55+) excess auto liability insurance requires the following:**

**Driver's License#** \_\_\_\_\_ **Auto Insurance Co.** \_\_\_\_\_

### Applicants for the Volunteer Center for Cowlitz-Wahkiakum agree to the following terms:

- \* Information provided in this application may be disclosed to organizations where I ask to volunteer
- \* I will keep all information confidential related to clients, volunteers, other persons or organizations where I serve
- \* As a volunteer I am not an employee of the VCCW, Lower Columbia CAP or agencies where I volunteer
- \* I am under no obligation to accept or continue any volunteer assignment unless I choose to do so
- \* I agree to provide the VCCW with my total hours of volunteer service each month
- \* I certify that I carry at least the minimum automobile liability insurance required by law
- \* I understand a criminal background check (WA State Patrol) is a mandatory part of the enrollment process
- \* I understand photo identification will be requested during the interview process
- \* I understand that an incomplete application will not be accepted or processed

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

*The Volunteer Center for Cowlitz-Wahkiakum reserves the right to deny an application*

### Office Use Only

Date received \_\_\_\_\_

Interview date \_\_\_\_\_

Station Assignment \_\_\_\_\_

Notes \_\_\_\_\_

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## Volunteering Preferences

Please check one or more preferences from this check list.  
Also, please circle your preferences in each category .

### Organization Preference:

- American Association of Retired Persons (AARP)**  
*Tax Aide, 55-Alive Driving Instructor, Board Member*
- Animal Care and Assistance**  
*Walk, groom, feed/water, make blankets, adoption events*
- Arts, Theater, Galleries, Museums**  
*Musician, performer, usher, fundraising, woodcarving  
Historic Homes of Old West Side researcher*
- Building, Construction**  
*Small repairs, painting, clean-up, household chores*
- Business**  
*Accounting, bookkeeping, administrative, clerical*
- Church**  
*Projects to benefit the community, Service Day*
- Disaster Response-Red Cross** *Sandbagging, disaster center*
- Driving**  
*Delivering Meals on Wheels, Medicaid and doctor  
appointment driving, DAV Van*
- Education**  
*Tutoring, story-telling, after-school programs,  
adult literacy/Project Read, mentoring children/teens*
- Food Bank**  
*Pick up/deliver/sort food/truck or fork lift driver*
- Hospital/Health Agency, Hospice**  
*Greeting, clerical, fundraising, nursing home advocate/Ombuds  
man, knit/crochet/quilt baby blankets for newborns, SHIBA,  
bloodmobile monitor*
- Law Enforcement**  
*Police Department, Satellite Station, Alley Gators,  
fraud prevention, Crime Victims Advocacy*
- Library**  
*Book sorting, computer aide, summer reading program*
- Outdoors**  
*Environmental clean-up, lead hikes, gleaning, gardening,  
trail building, mapping*
- Senior Center**  
*Hostess, bingo caller, fundraising, exercise instructor*
- TV Studio**  
*Production help, clerical*
- At Home**  
*Phone calling, knitting, crocheting hats and lap robes,  
cooking/baking*
- Non-Profit Agency**  
*Mailings/labeling, fundraising, committee or board  
member, telephoning*
- Veterans Issues** *Stand down, service officer*
- Other** \_\_\_\_\_

### Volunteer Activity Level:

- One time only
- Special Events
- Regular Schedule
- Weekends Only
- No Preference

### How Did You Hear About the Volunteer Center?

- CAP Website/Internet
- Newspaper
- Radio
- Television
- Volunteer Center Staff
- Friend/Family
- Volunteer Site
- Other \_\_\_\_\_

### How Many Hours Would You Like to Volunteer Per Month?

- Up to 10
- 11-20
- 21-40
- 40+

Return this application form completed and signed to:

**Volunteer Center for  
Cowlitz-Wahkiakum  
Lower Columbia CAP  
1526 Commerce Avenue  
Longview WA 98632**

**anitah@lowercolumbiacap.org**  
Fax: 360-425-8724  
If you have questions, please call  
360-425-3430 Ext. 288

