



VOLUNTEER APPLICATION

For young adults under 18

PERSONAL INFORMATION		
Name:		
Date of birth:	Phone Home:	Phone Cell:
Current address:		
City:	State:	ZIP Code:
Email:	Do you have a vehicle? Yes <input type="checkbox"/> No <input type="checkbox"/>	
School and/or Job:	Ethnicity (optional):	
Please list your favorite hobbies or special interests:		
Please inform us of any physical, mental, or medical limitation which may prevent you from performing volunteer tasks:		
Are you looking to complete community service hours at IONA? Yes <input type="checkbox"/> No <input type="checkbox"/> How many?		
If so, please explain if it is for school or another reason:		
EMERGENCY CONTACT		
Name:		Email:
Phone:	Relationship:	
VOLUNTEER EXPERIENCE		
How did you hear about IONA?		
Have you ever worked with older adults before? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If yes, in what way?		
What interests you about volunteering with IONA?		
Please list your previous volunteer experience:		



Part of the District's Senior Service Network-- 4125 Albemarle Street, NW Tel: 202-966-1055 Website: www.iona.org
Supported by the D.C. Office on Aging Washington, DC 20016 Fax: 202-895-0244 United Way/CFC #8833
 TTY: 202-895-9444

AVAILABILITY AND VOLUNTEER INTERESTS

Please let us know when it is convenient for you to volunteer by marking the spaces below:

	9:00	10:00	11:00	12:00	1:00	2:00	3:00	4:00	5:00
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please tell us anything else we should know about the times you are available to volunteer in the space below:

As an Iona Volunteer, I am interested in contributing to the well being of seniors in the following ways:

<input type="checkbox"/>	<p>Active Wellness at St Albans Volunteers: Our volunteers provide welcome support through: greeting participants, placing reservations, setting up for classes and meals, assisting in the kitchen, serving lunch, helping with workshops, seminars, and field trips. (Program located next to the National Cathedral). (Weekdays, 9:30 AM-2:00 PM)</p>
<input type="checkbox"/>	<p>Wellness and Arts Center Volunteers: Assist in creating a friendly atmosphere for older adults by supporting Iona staff with recreational activities, sharing your talents, socializing, helping with lunch, and administration. (Program located at Iona, 4125 Albemarle Street, NW). (Weekdays, 8:30 AM-5:00 PM)</p>
<input type="checkbox"/>	<p>Administrative Assistant: Help Iona accomplish its mission by contributing your organizational and/or administrative skills. Roles include: answering phones, data entry, filing, and general clerical assistance: (Weekdays)</p> <p>Do you have any computer skills? Yes <input type="checkbox"/> No <input type="checkbox"/> Are you familiar with Microsoft Office? Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<input type="checkbox"/>	<p>Other: If you have a special talent or service to share, let us know!</p>

If you have any questions regarding this application, or would like to learn more about our Volunteer Program, please contact the Iona team at (202) 895-9419. Thank you for your interest in volunteering with Iona Senior Services!
Please email this form to: volunteer@iona.org

SIGNATURE

I hereby affirm that all of the information I have provided on this application and in the interview process is true and complete.
I authorize IONA Senior Services to check my references as listed on the first page of this application.
I (and my guardian) understand that IONA Senior Services assumes **NO LIABILITY** while I volunteer.

Signature of applicant:	Date:
Signature of guardian:	Date: