



2801 S. Financial Court • Sanford, FL 32773 • 407-333-8877 • mealsetc.org

Volunteer Application and Registration Form

As a candidate for a volunteer position with Meals on Wheels, Etc., I am willing to furnish the following information to help determine my interest and qualifications. I understand and agree that a background check may be required in order to protect the safety and confidentiality of Meals on Wheels, Etc.'s clients.

PERSONAL INFORMATION

Name: _____
Last First Middle

Address: _____
Number Street City State Zip

Home Phone: _____ Cell Phone: _____

Email Address: _____

Soc.Sec.#: _____ - _____ - _____ Date of Birth: _____ / _____ / _____

If you are currently employed, please provide:

Place of Employment: _____

Work Phone: _____

Work Email: _____

Do you have any physical limitations that need to be taken into consideration for volunteer placement? No Yes *If yes, please explain:*

EMERGENCY CONTACT INFORMATION

Name: _____
Last First Middle

Address: _____
Number Street City State Zip

Home Phone: _____ Cell Phone: _____

Email Address: _____

Relationship: _____

PREFERRED AREA OF VOLUNTEER SERVICE

Please select and/or describe the volunteer opportunities you are interested in:

- Meal Delivery*
- Workplace Meal Delivery Team*
- Neighborhood Dining Site Support
- Chore Projects: _____
- Safety Equipment Installation

** Volunteers delivering meals use their personal vehicles. If this volunteer opportunity is of interest to you, please provide the following additional information:*

Driver's License No.: _____ Exp. Date: _____ / _____ / _____

Automobile Insurance Provider: _____

Policy No.: _____ Exp. Date: _____ / _____ / _____

AVAILABILITY

How often would you like to volunteer?

Daily Weekly Monthly Other, please specify: _____

We deliver meals between the hours of 8:30 am and 12:30 pm, will this timeframe work for you?

Yes No

What day(s) are you available?

Mon. Tues. Wed. Thurs. Fri.

How much time can you volunteer in a typical shift?

1.5 Hours (Typically what it takes to complete a meal delivery route)

Other, please specify: _____

SPECIAL/SPECIFIC SKILLS

Please list any special skills you have which could be applied while volunteering:

In addition to English, do you speak any other languages? If yes, please list them below:

AGREEMENT AND RELEASE

If I am accepted as a Meals on Wheels, Etc. volunteer:

- 1) I agree to offer my services as a volunteer and understand I am not a paid employee.
- 2) I understand that if I use my personal vehicle as transportation, I will not be reimbursed for any vehicle related expenses, and I must keep in effect my automobile insurance equal to the minimum required by the State of Florida.
- 3) I understand that Meals on Wheels, Etc. may be required to run a background check and my acceptance as a volunteer may be dependent on the background check results.
- 4) I agree to indemnify and hold Meals on Wheels, Etc. harmless of and from any and all claims, demands, losses, suites, or all other damages of any kind arising from my activities as a volunteer for them.
- 5) I received, read, understand and agree to abide by the Meals on Wheels, Etc. Volunteer Handbook.

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or misrepresentations made by me on this application may result in my dismissal.

Applicant's Signature

Date

Applicant's Printed or Typed Name

- FOR MEALS ON WHEELS, ETC. OFFICE USE ONLY -

>20 Hours/Month:

Level II Background Check

Follow-up: _____ / / Initials: _____

Training: _____ / / Initials: _____

<20 Hours/Month:

FDLE Career Offender Search

Dru Sjodin Website Search

Level I Background Check