

RONALD McDONALD HOUSE CHARITIES OF CENTRAL GEORGIA
1160 Forsyth Street
Macon, Georgia 31201
Phone 478.746.4090 Fax 478.746.0580

VOLUNTEER SERVICE APPLICATION

CONFIDENTIAL INFORMATION

Date: _____

(PLEASE PRINT CLEARLY)

Personal Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Work Phone: _____

Email Address: _____

Birthdate: Month _____ Day _____ Age: Under 16 16-21 21-64 Over 65

Employment

Current Employer: _____ Position: _____

How long have you been with your current employer? _____

Student ♦ Note: Volunteers under the age of 16 MUST be accompanied by an adult.

Are you presently attending school? Yes No Name of school _____

Will you be receiving academic credit for your volunteer work? Yes No

Can you make a commitment to RMH for at least one year? Yes No

If no, please explain _____

How did you hear about the Ronald McDonald House Volunteer Program? _____

Have you ever been convicted of a felony? Yes No If Yes, please explain: _____

GENERAL VOLUNTEER RESPONSIBILITIES

The volunteer staff is of key importance to the Ronald McDonald House. RMH In-House volunteers are responsible for assistance in the daily operation of the House as well as promoting direct interaction with its resident families.

OFFICE SERVICES

- * Assemble Mailings
- * General Clerical

BUILDING AND GROUNDS

- * House Cleaning
- * Interior Maintenance/Repair

Guest Services

- * Guest Assistance and Support
- * Guest Registration

Miscellaneous

- * Fundraisers
- * Special Events

VOLUNTEER OPPORTUNITIES

HOUSE VOLUNTEER

- Serves as receptionist for the House:
 - Answering Phones
 - Giving House Tours
 - Routine tasks for daily operations of the House, Helping with daily chores
 - Assists with day to day operations of the House

WEEKEND MANAGER

- Serves as Manager for the House, Friday, 6:00 pm through Sunday, 6:00 pm.
 - Living/Sleeping accommodations provided.
 - Responsible for weekend operations (Office & Guest, Building & Guest Services)

MCMEAL PROGRAM

- Group or individual prepares evening meal for our families (15-25 people).

SPECIAL EVENTS

- Assist in planning, organizing and implementing special events for the House.

SHIFTS AVAILABLE

- ♦ House volunteer shifts are available seven (7) days a week.
- ♦ You may work a shift weekly; every two weeks, monthly; or FLEX (the FLEX volunteer calls the House monthly when they know their personal/work schedule and fills in on a needed shift).

* Shifts Available: Please check those for which you are available.

Monday – Friday

- 9:00 am – 12:00 noon
- 12:00 noon – 3:00 pm
- 3:00 pm – 6:00 pm
- 6:00 pm – 9:00 pm

Saturday

- 1:00 pm – 4:00 pm

Sunday

- 1:00 pm – 4:00 pm

* Day(s) Available: Please check day(s) you are available.

- Monday Tuesday Wednesday Thursday Friday Saturday Sunday

I would like to volunteer (circle one) weekly 2x month 3x month 1x month

ADDITIONAL INFORMATION

PERSONAL REFERENCES – HOUSE VOLUNTEERS

Please list three people whom you have known for at least one year and can attest to your character, skills, and dependability. You may include current or previous employers. Attached is a Reference Information Form. **Please have listed references complete the form and return to Volunteer Coordinator.**

Name	Phone	Relationship

PLEDGE OF CONFIDENTIALITY

I hereby pledge that I shall safeguard and treat as CONFIDENTIAL all information (whether acquired through verbal communication, written record or observation) pertaining to any resident, staff member or Volunteer of the Ronald McDonald House Charities of Central Georgia, which I may, through my affiliation with the House, so acquire. Failure to comply with this policy will result in volunteer's dismissal.

I have read and do understand the foregoing pledge of confidentiality.

Signature of Applicant
Date

I understand the importance of this volunteer commitment and have answered the application question honestly and to the best of my knowledge. I give Ronald McDonald House Charities of Central Georgia permission to check the references I have listed. Certain volunteer positions require a background check.

Signature of Applicant
Date

Applicants under the age of 18 must have this application signed by their parent or guardian. This applicant has my permission to volunteer at the Ronald McDonald House of Central GA.

Parent or Guardian Signature _____ Date _____

Mail to:

Keysha Smith, Volunteer Coordinator

Ronald McDonald House Charities of Central Georgia

1160 Forsyth Street

Macon, Georgia 31201

Phone: 478.746.4090

Fax: 478.746.0580

Email: hm@rmhccga.org

FOR OFFICE USE ONLY: Initial when completed **DATE RECEIVED:** _____

Orientation/Training
 Assigned Shift
 Exceed

On Telephone List (sub list)
 Birthday List

Ronald McDonald House Charities of Central Georgia

Volunteer Reference Information

Reference Name: _____

I am applying to volunteer with the Ronald McDonald House Charities of Central Georgia and would like to use you as a reference. Please take a moment to complete the following reference information for the House. Please note the information will be kept confidential.

Once completed please fax the form to the Volunteer Coordinator at 478.746.0580 or mail it to the Volunteer Coordinator at 1160 Forsyth St., Macon, GA 31201.

Thank you!

Volunteer Applicant's Name _____

1. How long have you known the applicant?
2. Please rate the applicant in regard to the following characteristics:

Excellent Good Satisfactory Poor

Cooperative _____

Reliable _____

Personable _____

Efficient _____

Considerate _____

Caring _____

Responsible _____

3. Would you recommend this applicant for volunteer service?

4. Comments

The Ronald McDonald House of Central Georgia is a *Home Away From Home* for the families of seriously ill or critically injured children being treated at local hospitals.

Ronald McDonald House Charities of Central Georgia

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