



Bronx Health Corps Volunteer Application

Geriatric Workforce Enhancement Program

PERSONAL INFORMATION:

Name:

Address:

City:

State:

Zip Code:

Home Phone:

Cell Phone:

Work
Phone:

Preferred Contact: Home Work Cell

E-mail Address:

EMERGENCY CONTACT:

Name:

Phone:

Relationship:

EDUCATION: *Optional. Indicate the highest level completed.*

HS/GED

Some College

B.A. or B.S.

Post Grad

Other

REFERENCES: *List Two People (other than relatives).*

Name:

Phone:

Relationship:

Time Known:

Name:

Phone:

Relationship:

Time Known:

VOLUNTEER INFORMATION: *Your responses will not determine your eligibility.*

Please indicate how you heard about us and summarize your previous volunteer experience.

Please briefly explain your reason for volunteering.

Please indicate any special skills, training, credentials, and proficiency in languages other than English.

Topics: *Please indicate your 1st, 2nd, & 3rd choices.*

1st Choice:

Asthma
Alzheimer's Disease
& Related Dementias
Diabetes
Heart Failure
Healthy Living

2nd Choice:

Asthma
Alzheimer's Disease
& Related Dementias
Diabetes
Heart Failure
Healthy Living

3rd Choice:

Asthma
Alzheimer's Disease
& Related Dementias
Diabetes
Heart Failure
Healthy Living

Availability: *Indicate the time you are available.*

Mornings 11:00am - 12:00pm

Afternoons 1:00pm - 2:00pm

Both?

Yes
No

Yes
No

Yes
No

DISCLAIMER AND SIGNATURE:

I understand that participation in the Bronx Health Corps is voluntary and that I do not expect payment or compensation of any kind. The Bronx Health Corps is a project under the Geriatric Workforce Enhancement Program (GWEP) which is funded by the Health Resources and Services Administration (HRSA). If selected, I will adhere to my training schedule and other responsibilities as set forth by R.A.I.N.

Signature: _____ Date: _____

We greatly appreciate your participation!

Please return this application to:
Regional Aid for Interim Needs Inc., Attn: GWEP - Volunteer Program
3377 White Plains Rd, Bronx, NY 10467

R.A.I.N. Internal Use Only