

Volunteer Application

- Completing this application is the first step toward being a volunteer at Upstate Carolina Medical Center.
- This completed application must be returned to the Director of Human Resources in order to start the process. You may leave it at the Human Resources office or at the hospital front desk.
- All applicants are submitted to the Volunteer Services Executive Officers for evaluation and acceptance before they are submitted to the hospital for further processing.
- If approved by the Volunteer Services Executive Officers, the applicant is then referred to the hospital's Director of Volunteer Services and Human Resources for official Orientation.
- Volunteers are asked to work a minimum of 4 hours each week.

Please Print

Your Complete Name: _____

Today's Date: _____ Your Date of Birth: _____

Your Address: _____

Your Home Phone: _____ Your Work Phone: _____

If you are currently employed, where do you work? _____

In what position? _____ What are your working hours? _____

If you are not currently working, who was your last employer? _____

What position? _____

What is your highest education level? _____

If you have any health limitations, what are they? _____

In case of an emergency, who should we contact? _____

That person's telephone number, please: _____

Why do you want to be a volunteer at Upstate Carolina Medical Center? _____

Previous volunteer experience: _____

Your hobbies and/or interests: _____

What days and hours will you be available to volunteer? _____

Please list 2 character references and their telephone numbers: _____

Your comments, please: _____

Your signature, please: _____

