



Milford Regional Medical Center Application for Volunteer Services

Name: _____

Date: _____

Address: _____
Street Town/City State Zip code

Home Phone: _____ Cell Phone: _____ e-mail: _____

Emergency Contact: _____
Name Relation Phone #

○ Why do you want to volunteer at Milford Regional? _____

○ Is there a specific department or population you would like to volunteer with?

○ What strengths, skills, interests, do you feel you can bring?

○ How many days a week would you like to volunteer? _____

○ Are you available: Mornings _____, Afternoons _____, Evenings _____, Flexible _____

○ How long a commitment can you make? 3 mos. _____, 6 mos. _____ 1 yr. _____ more _____

○ Please list any limitations that may affect your assigned duties as a volunteer.

(over)

Education

- Last grade completed. _____
- **Would this volunteer position be part of a student internship, course credit, or community service project? Yes No**
If yes, please describe briefly: _____

Employment / Volunteer Experience

- Are you currently employed? Yes No
- If yes please list name of agency and current position /job title: _____

- What, if any, experiences have you had working / volunteering in a healthcare setting?

- Have you been convicted of a felony with in the past five years? Yes No
If yes, please explain when, where, and disposition of case.

- We like to acknowledge volunteer birthdays with a card. Please give month and day of birth.



If accepted as a volunteer, I agree to uphold the following:

I will:

- *Abide by Milford Regional Medical Center regulations.*
- *Maintain Patient Confidentiality. All information concerning patients is private. I will not discuss information about patients within or outside the hospital.*
- *Extend a courteous and considerate attitude to patients, visitors, staff, and fellow volunteers. (Kindness sets the tone.)*
- *Take any problems, suggestions, or criticisms to the Director of Volunteer Services.*
- *Conform to the prescribed standard of dress and appearance.*

Signed: _____

Return Application to:

**Volunteer Services
Milford Regional Medical Center
14 Prospect Street
Milford MA 01757**