

## VOLUNTEER APPLICATION North Okanagan Better At Home

CONTACT				
Title <input type="checkbox"/> Mr. <input type="checkbox"/> Dr. <input type="checkbox"/> Miss <input type="checkbox"/> Ms. <input type="checkbox"/> Mrs. <input type="checkbox"/> Other	Legal Last Name	Legal First Name	Preferred Name	Gender <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Other
Home Phone Number		Alternate Phone Number (non-emergency)		Email Address
Home/Street Address		City	Province	Postal Code
Mailing Address (if different from above)		City	Province	Postal Code
Emergency Contact Name		Emergency Contact Relationship		Emergency Contact Phone Number
VOLUNTEER SERVICES				
<p>What services would you be most interested in and available to volunteer for? Please check all that apply.  <i>Note: NexusBC will perform a free criminal record check prior to you starting any services delivery. For Transportation and Grocery Shopping, we will require a copy of your driver's license, insurance papers and driver's abstract when you come for your meeting with the Program Coordinator.</i></p>				
<input type="checkbox"/> <b>Transportation</b> - Using your own vehicle, you'll pick up seniors and drive them to appointments and other outings. You'll either stay with your senior during the outing or arrange to come back and pick them up. Local area trips typically take 1 to 1.5 hours; out-of-area trips (Kelowna, Salmon Arm, Kamloops) typically take 3 to 4 hours. You will be compensated for fuel and any parking fees. In most cases, your regular ICBC insurance will cover you.				
<input type="checkbox"/> <b>Grocery Shopping</b> - Using your own vehicle, you'll pick up your senior and drive them to a local grocery store(s). You'll help the senior select, bag, and load their groceries. Once you arrive back at the senior's home, you'll help upload the bags and put away the groceries. The senior pays for all of their groceries. A typical trip will take 1 to 1.5 hours. You will be compensated for fuel and any parking fees. In most cases, your regular ICBC insurance will cover you.				
<input type="checkbox"/> <b>Minor Home Repair</b> - Using your amazing handyman/woman skills, you'll perform minor repairs and home maintenance tasks such as changing light bulbs, assembling shelves, fixing hooks and knobs, and replacing small fixtures. The senior is responsible for all necessary materials; though you may need to bring along some tools. A typical service will take about 1 hour.				
<input type="checkbox"/> <b>Yard Work</b> – Using your green thumb and love of the outdoors, you'll deliver yard work services such as lawn mowing, weeding and spring/fall light clean up. In most cases, the senior will supply all necessary equipment. A typical service would be 1 to 2 hours.				
<input type="checkbox"/> <b>Friendly Visiting</b> – Regularly socializing with a senior, having coffee or tea, playing games, talking or reading				
<input type="checkbox"/> <b>Office Volunteer</b> – Assisting the Program Coordinator with office tasks related to service delivery				
<input type="checkbox"/> <b>Telephone Events and Activities for Seniors (TEAS) Facilitator</b> - Run a 1-hour telephone session on fun and interesting topics over the phone with seniors.				
<p><b><i>Volunteers that will be driving a senior in their vehicle will need to provide a copy of their driver's license, insurance and an abstract to be kept on file.</i></b></p>				

VOLUNTEER INFORMATION			
How did you find out about the Better at Home program?			
Do you have any previous volunteer or related work experience? If yes, please describe.			
Please check any specific experience and/or training that you have in the following areas.			
<input type="checkbox"/> Deaf and hard of hearing	<input type="checkbox"/> Wheelchair users	<input type="checkbox"/> Mental health issues	<input type="checkbox"/> Other:
<input type="checkbox"/> Visually impaired	<input type="checkbox"/> Physical mobility issues	<input type="checkbox"/> Second language – Please indicate _____	
Please describe any medical or health issues that may impact your ability to perform your volunteer role or that we should know about for your own safety.			
Please provide two references that we can contact.			
First and Last Name	Phone Number	Type of Reference	
		<input type="checkbox"/> Employer <input type="checkbox"/> Friend <input type="checkbox"/> Relation <input type="checkbox"/> Other: _____	
First and Last Name	Phone Number	Type of Reference	
		<input type="checkbox"/> Employer <input type="checkbox"/> Friend <input type="checkbox"/> Relation <input type="checkbox"/> Other: _____	
Applicant consent for NexusBC to contact these references for the purpose of assessing volunteer suitability:			
Applicant Signature: _____ Date: _____			

**DISCLAIMER & POLICY**

Completing this application does not guarantee selection for a volunteer position; an interview with the Better At Home Program Coordinator is required to assess suitability. NexusBC reserves the right to verify all information provided on the application form without being accused of invasion of privacy. Applicants who misrepresent themselves will not be offered a volunteer position. NexusBC Community Resource Centre provides equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. In order to ensure the safety of our clients, all volunteers will be required to have a Criminal Record Check and we can help you do this for FREE.

**Completed applications can be submitted via:**

In person at: 102-3201 30<sup>th</sup> St. Vernon, BC

Email: [betterathome@nexusbc.ca](mailto:betterathome@nexusbc.ca)

Fax: 250-545-5418

***Thank you for your interest in volunteering with the Better At Home program.***

We will contact you soon to set up a time to meet for an interview to discuss your volunteer interest further.

OFFICE USE ONLY		
Contacted Date	Contacted By	Interview Date