



RSVP Application

RSVP is a Senior Corps program administered by the Corporation for National & Community Service and is sponsored locally by Senior Resources of Guilford. A completed application form is required for *all* volunteers.

Applicants must be 55+ to participate in the Retired & Senior Volunteer Program (RSVP).

PLEASE PRINT

Name _____ Mr./Mrs./Ms./Dr.
Last First Middle (Please circle one)

Address _____
Street City State Zip

Home Phone: _____ Cell Phone: _____ Veteran: Y N Branch _____

E-mail address _____ Languages spoken _____

Place of employment (present/previous): _____ Work Phone: _____

This information is used for data purposes only. The application is confidential.

Date of Birth: ___/___/___ Male ___ Female ___ Marital Status: S M D W Race: _____

Emergency Contact Information

Name: _____ Relationship: _____

Home #: _____ Cell #: _____ Work #: _____

Personal References

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Name _____ Address _____ Phone _____

Automobile Insurance Information

Do you plan to drive your own car? Yes ___ No ___ (If yes, please complete the following)

Driver's License No. _____ License Expiration Date: _____

Insurance Company's Name _____ If I use my personal automobile in my volunteer service, I understand I must keep automobile liability insurance in effect equal to the minimum limits required by North Carolina. (Please initial _____).

I would like to help with *(Please check all of the activities where you could help)*

- Literacy Programs ~ Tutor children or adults in reading and/or writing skills
- Companionhip/Respite ~ Provide companionship to a care recipient & respite to a caregiver
- Transportation ~ Drive seniors & veterans to medical & non-medical appointments
- Veterans Services ~ Assist organizations that provide services to our veterans, including transportation for veterans
- Local Community Nutrition Programs ~ Assist in serving meals to seniors
- Food Bank/Pantry ~ Assist in the collection, stocking and distribution of food to those in need
- Mentor Youth ~ Mentor a child to ensure success in school
- Friendly Phone Calls ~ Provide reassurance to an older adult by calling them daily to ensure their well-being
- Adult Day & Senior Centers ~ Conduct and/or assist with programs
- Mobile Meals ~ Deliver meals to home bound seniors
- Virtual Hands ~ Create and donate knitted, crocheted and/or sewn items for veterans, babies & individuals experiencing illness
- Health Insurance Information (SHIIP) ~ Assist older adults with health insurance questions
- Disaster Preparedness-Assist RSVP Director in carrying out disaster preparedness programs
- Home Repair ~ Provide minor home repair services to seniors & veterans age 60+

Are you willing to assist with special projects? (i.e. 9/11 Day of Service, MLK Day of Service): Yes ___ No ___

Special skills, experiences or hobbies: _____

Current/previous volunteer service experience: _____

Number of years you have volunteered in any volunteer program: _____

Times Available	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
A.M.							
P.M.							

Have you ever been convicted of an offense against the law other than a minor traffic violation? Yes ___ No ___

If yes, please explain _____

Confidentiality

Volunteers are responsible for maintaining confidentiality of all proprietary or privileged information to which they are exposed while serving as a volunteer, whether this information includes program participants, volunteers, staff members or other persons or concerns of overall agency business. Failure to maintain confidentiality will lead to termination of the volunteer’s relationship with Senior Resources of Guilford.

By signing this application, I agree to the terms of confidentiality. I also attest that the information on this form is true and accurate to the best of my knowledge.

Your Signature: _____ Date: _____

Please call the RSVP Director at **336-373-4816** from Greensboro or **884-4816** from High Point and Jamestown to discuss current volunteer opportunities and set up volunteer orientation or if you have questions.

If mailing, please return your completed and signed application to:

Senior Resources of Guilford
Attn: RSVP Director
PO Box 21993
Greensboro, NC 27420

Senior Resources of Guilford is a United Way Member Agency