

**BAYLOR SCOTT & WHITE HEALTHCARE - COLLEGE STATION REGION**

**ADULT VOLUNTEER APPLICATION**

**PERSONAL DATA**

NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_

CELL PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_

TEXAS RESIDENCE SINCE \_\_\_\_\_ BIRTHDATE: MO \_\_\_\_\_ DAY \_\_\_\_\_ YR \_\_\_\_\_

SPOUSE'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_

PERSON TO NOTIFY IN CASE OF EMERGENCY \_\_\_\_\_

ADDRESS \_\_\_\_\_ EMAIL \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

ANY INFORMATION YOU WISH TO SHARE SHOULD A MEDICAL EMERGENCY ARISE (ALLERGIES, MEDICATIONS, ETC.) \_\_\_\_\_

PERSONAL PHYSICIAN \_\_\_\_\_ PHONE \_\_\_\_\_

**EXPERIENCE**

EMPLOYER \_\_\_\_\_ PHONE \_\_\_\_\_

PREVIOUS WORK EXPERIENCE \_\_\_\_\_

EDUCATION/ SKILLS \_\_\_\_\_ FOREIGN LANGUAGES SPOKEN \_\_\_\_\_

COMMUNITY AFFILIATIONS \_\_\_\_\_

FRIENDS/ RELATIVES EMPLOYED BY S&W \_\_\_\_\_

**PLACEMENT PREFERENCE**

AREAS OF INTEREST TO VOLUNTEER \_\_\_\_\_

PREFERRED TIME (Times Available -5A-9P M-F; 8A-9P Sat/Sun) \_\_\_\_\_ DAYS OF WEEK \_\_\_\_\_

HAVE YOU BEEN INVOLVED IN HEALTHCARE LEGAL ACTION IN THE PAST FOUR YEARS? YES NO

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF, BEEN GIVEN PROBATION OR DEFERRED ADJUDICATION IN LIEU OF SENTENCING, OR PLED NO CONTEST FOR ANY OFFENSE OTHER THAN A MINOR TRAFFICE VIOLATION? YES NO

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

ARE YOU CHARGED WITH ANY UNRESOLVED OR PENDING CRIMINAL CHARGE? (ARE YOU CHARGED WITH A CRIME THAT HAS NOT YET RESULTED IN A PLEA OF GUILTY, COURT TRIAL, DEFERRED ADJUDICATION OR DROPPING OF THE CHARGE)?

YES NO

IF YES, PLEASE EXPLAIN: \_\_\_\_\_

In compliance with the Volunteer policy, a background check, health screening and drug screening will be performed. A volunteer in patient-care areas must provide written, dated medical records as evidence of vaccination and/or immunity before volunteering. A Volunteer Release Form is also required. All volunteers must complete an in-service covering clinic policies and procedures, ethics and protocol.

The designated volunteer uniform is khaki pants or skirt (no denim is allowed) and a Scott & White button down shirt which must be purchased for \$20 or smock for \$28. Volunteers are required to wear a name badge while on duty at all times. If you should lose your badge, promptly contact the Department of Volunteer Services to have it replaced at a cost of \$10.00.

*Personal contact is made after application is received and reviewed.*

ALL INFORMATION PROVIDED IS COMPLETE AND CURRENT. I UNDERSTAND AND ACCEPT THE POLICIES AS STIPULATED ABOVE.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

**Please return application to: Volunteer Services, 700 Scott & White Dr., CS, TX 77845; phone 979-207-0122**

**FOR OFFICE USE ONLY** DATE APPLICATION RECEIVED: \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_ EXT \_\_\_\_\_