



**Senior Volunteer Enrollment Form**

Please return your completed application to: **RSVP/SVA AIS**  
5560 Overland Ave., Ste. 310, San Diego, CA 92123-1204  
Phone: (858) 505-6399

**Personal Information (All information on this form is confidential)**

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

City/St/Zip \_\_\_\_\_ Phone: \_\_\_\_\_

Gender:  Male  Female

Emergency contact name: \_\_\_\_\_ Phone: \_\_\_\_\_

Statistical Information (check all boxes that apply, optional):

- American Indian or Alaskan Native  Asian  Black or African American
- Hispanic or Latino  Native Hawaiian or Pacific Island  White  Other

Previous occupation: \_\_\_\_\_

Have you ever served in the United States military?  Yes  No

Are you a spouse of someone who has served in the U.S. military?  Yes  No

Have you ever been convicted of an offense against the law?  Yes  No

Do you need any accommodations to perform the duties of a volunteer? If so, please explain (Example: Handicap access to buildings, limited mobility, etc.): \_\_\_\_\_

**Supplemental Insurance while Volunteering. Required Information**

Volunteers with hours are covered by supplemental insurance, including an accidental death benefit. Please provide beneficiary information below:

Beneficiary: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone: \_\_\_\_\_ Address: \_\_\_\_\_

RSVP/SVA also provides supplemental accident insurance. Do you have a car?  Yes  No

Driver's License No.: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Auto Insurance Company: \_\_\_\_\_

I hereby certify that if I use my personal vehicle for my volunteer assignment, I will keep in effect a valid driver's license and vehicle insurance. I understand that my photo, participating in volunteer activities, may be used in the volunteer website or other Aging & Independence Services materials.

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please also complete page two →**

**Volunteer Interest and Skills -please circle interest (I) and/or skill (S)**

- |   |   |   |
|---|---|---|
| <b>I S</b> Assisting in events              | <b>I S</b> Gleaner – Gathering surplus food | <b>I S</b> Office Management            |
| <b>I S</b> Administrative work              | <b>I S</b> Habitat Protection               | <b>I S</b> Office Support               |
| <b>I S</b> Arts or Crafts                   | <b>I S</b> Hospital Volunteer               | <b>I S</b> Phone – Office               |
| <b>I S</b> Companionship/Visit              | <b>I S</b> Information Assistant            | <b>I S</b> Senior Center Aide           |
| <b>I S</b> Computer Skills                  | <b>I S</b> Intergenerational Activities     | <b>I S</b> Senior Volunteer Patrol      |
| <b>I S</b> Computers, Technology            | <b>I S</b> Intergenerational Games          | <b>I S</b> Veteran Services             |
| <b>I S</b> Delivery – Meals                 | <b>I S</b> Law Enforcement                  | <b>I S</b> Visit/call Homebound Seniors |
| <b>I S</b> Disaster Preparedness            | <b>I S</b> Library Assistant                | <b>I S</b> Volunteer Coordinator        |
| <b>I S</b> Docent/Tour Guide                | <b>I S</b> Maintenance/Repairs/Home         | <b>I S</b> Writing Skills               |
| <b>I S</b> Driver/Transportation Assistance | <b>I S</b> Museum Host/Hostess              | <b>I S</b> Researching                  |
| <b>I S</b> Environmental Stewardship        | <b>I S</b> Native Plant Conservation        | <b>I S</b> Newsletter Development       |
|   |   | <b>I S</b> Other _____                  |

I would also like to be contacted for periodic one- time special volunteer opportunities  Yes  No

How far are you willing to commute to volunteer? \_\_\_\_\_

Planned mode of transportation to volunteer assignment:  Car  Bus  Carpool  Taxi

I am presently volunteering.  Yes  No

IF YOU ARE VOLUNTEERING, WHERE? \_\_\_\_\_

How would you like to receive the newsletter?  Email  Regular mail

How did you find out about this volunteer program?  Friend  Staff  Newspaper

Internet  Resource Fair  Other \_\_\_\_\_

FOR RSVP OFFICE USE ONLY	
Volunteer Station:	Job Title:
<input type="checkbox"/> RSVP <input type="checkbox"/> AIS Volunteer Program	RSVP Staff Initials:
Welcome Packet Sent ____ / ____ / ____	Entered in Computer ____ / ____ / ____