



WALDO COUNTY GENERAL HOSPITAL
 118 Northport Avenue, PO Box 287, Belfast, Maine 04915

HOSPITAL AID & VOLUNTEER APPLICATION

Name: _____ Today's Date: _____

Address: _____

Telephone number: _____ E-mail address: _____

Month of Birth: _____ (Must be at least 18 years old.)

How long have you been a resident of this state? _____ How did you learn about the Aid? _____

_____ Do you know any current members? _____

If yes, who? _____ Why do you want to join the Aid? _____

CHECK THE TYPE(S) OF VOLUNTEER WORK YOU ARE INTERESTED IN:

Inside the Hospital or Affiliate Organizations: (These duties need orientation, Mandatory Inservice Day (MID), test for tuberculosis (PPD) and proof of immunizations.)

- TRANSPORT / GREETING SERVICES – Errands, greets and directs people entering lobby. Weekdays, 9 am - 2 pm.
- MAIL ROOM - Weekdays, 9 am - 1:30 pm.
- CENTRAL REGISTRATION – Greets and directs patients signing in for services. Weekdays, 8:30 am (or earlier) - 2 pm.
- GIFT SHOP CASHIER - Weekdays, 10 am – 3:30 pm or Saturday, 12:30 - 3:30 pm.
- OFFICE WORKER Weekdays, variable times.
- SHORT-TERM PROJECTS, such as mailings.
- OTHER _____

Outside the Healthcare Facility: (These duties do not require MID training.)

- TRAY FAVORS / CRAFTS Make decorations for patients and the Hospital. First Monday of Feb, Mar, Apr, Oct, Nov, Dec, 10:00-11:30 am, meets at WCGH Education Ctr.
- GIFT SHOP CRAFTER Creates items to sell in Hospital Gift Shop.
- KNITTING BABY HATS / AFGHANS For Women & Infants Health Care Unit.
- PUBLICITY - For Aid events.
- SUPPORTIVE MEMBER - Attends meetings and events, but does not volunteer.
- CLINICS – Clerical duties at bloodmobile, wellness fair, blood pressure clinic, etc.
- TELEPHONE CALLER to Aid Members to remind of events.
- DECORATIONS FOR HOLIDAYS & EVENTS Works with Decorating Chairperson.
- SPECIAL EVENTS & FUNDRAISERS – Silver Tea, Health Fair, Yard Sale, Garden Tour, etc.
- BOARD MEMBER or COORDINATOR

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You will be added to our mailing list. Do you wish to be called to be reminded of meetings? Yes No

Thank you for completing the application and joining the Hospital Aid.

Please return to: Community Relations Coordinator, Waldo County General Hospital, P.O. Box 287, Belfast, Maine 04915 along with \$10 dues payable to the Waldo County General Hospital Aid.

Dues are renewable yearly in May. A membership card will be sent to you from the membership chairperson.

IF YOU ARE INTERESTED IN VOLUNTEERING IN THE HOSPITAL, PLEASE COMPLETE THE REMAINDER OF THE APPLICATION.

Summarize your education, work or life experiences: _____

Have you volunteered at any other organization? Yes No Briefly describe when, where and duties: _____

Do you have any special skills that may be useful at the hospital? _____

Have you ever been convicted of a felony or misdemeanor? Yes No If yes, please explain: _____

Is there anything else you would like us to know about you? _____

In Case of Emergency Notify:

Name: _____ Relationship: _____ Telephone: _____
Address: _____

References (at least one reference must be a non-family member):

Name: _____ Name: _____
Address: _____ Address: _____
Telephone: _____ Telephone: _____
E-mail: _____ E-mail: _____

I voluntarily authorize Waldo County General Hospital to verify information contained on my application. I agree to return my photo I.D. badge when I stop volunteering.

Signature: _____

We will send you information on the hospital and the volunteer positions. We will also call you to come in for an interview to discuss the positions available.