



803 West Park Ave, Port Townsend, WA 98368

Retired & Senior Volunteer Program Volunteer Application

RSVP050 (Rev. 05/08/07)

Please Note: All information requested on this Application form will be kept confidential. The date of birth is required as the RSVP program is for participants who are 55 years of age or older.

Part 1. Personal Information

1. Name of Applicant: (Last, First, Middle)		2. Gender:	3. Date of Birth:
4. Mailing Address – Street:			5. Apt. #:
6. City:	7. State:	8. Zip Code:	
9. Phone Number:		10. Email Address:	
11. Current or Previous Occupation(s):		12. Volunteer Experience:	
13. Skills/Interests/Languages:			
14. Emergency Contact:		15. Emergency Contact Phone Number:	
16. Race: <input type="checkbox"/> White <input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Black or African American <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian or other Pacific Islander	16a. Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino <input type="checkbox"/> Don't Know	17. Education (Highest Level Completed) <input type="checkbox"/> Grade 8 <input type="checkbox"/> Some High School <input type="checkbox"/> High School Diploma <input type="checkbox"/> Some College <input type="checkbox"/> 2-year College Degree <input type="checkbox"/> 4-year College Degree	

Part 2. Insurance Information

18. RSVP Excess auto liability insurance requires the following: Driver's License # _____ Do you carry the state-required minimum liability insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No	19. Please name a beneficiary for your RSVP Accident Insurance Benefits: Beneficiary: _____ Address: _____ Phone Number: _____
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Applicant's Signature: _____ **Date:** _____

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Vol. # _____ Intake Date: _____

Director's Signature: _____

Please Complete Other Side

Volunteer Skills/Interests Inventory

Please check items for which you would consider volunteering and/or have experience.

Meeting People/Working in groups

- Greeting or hosting
- Playing music or entertaining
- Preparing mailings with a team
- Providing people with information
- Selling as part of a group
- Serving or preparing food for people
- Working on committees or projects

Tasks I can complete myself

- Bookkeeping or record keeping
- Chores for the homebound
- Clerical: typing, filing, or receptionist
- Computer data entry or word processing
- Making telephone calls
- Fix things or general home repair
- Gardening or yard work

Leading, Teaching, Helping Others

- Advise i.e. taxes, insurance, budget
- Advocate for an individual or cause
- Lead a fundraising activity
- Listen to people/direct to assistance
- Manage a team of people
- Organize a project
- Serve as a member on boards
- Speak to groups or do public relations
- Tutor or teach a skill
- Drive or escort

Skills I could use or develop

- Carpentry
- Cooking
- Foreign languages
- Gardening
- Knitting, crocheting, sewing
- Mechanics

- Music
- Photography
- Small appliance repair
- Woodworking
- Writing

Areas of Interest

- Arts
- Children
- Consumer protection
- Disaster relief
- Discrimination
- Domestic violence
- Drug abuse/alcohol
- Education
- Environment
- Health care
- Homeland Security
- Homelessness and hunger
- Law enforcement
- Legislative process
- Literacy
- Mental health
- Parenting/family
- Refugees
- Seniors
- Teenagers

Availability

- I want to work at home
- One day events/short term projects
- Ongoing projects
- Weekdays
- Weekends
- Mornings
- Afternoons
- Evenings

For more information, contact the Volunteer Coordinator in your county

Clallam County

Helen Walker, Volunteer Coordinator
Port Angeles Senior Center
328 East 7th Street
Port Angeles, WA 98362 360-457-1771
hwalker@olycap.org

Jefferson County

Bonnie Woodriff, Volunteer Coordinator
Tri-Area Community Center
10 West Valley Rd / PO Box 207
Chimacum, WA 98325 360-732-0787
bwoodriff@olycap.org

RSVP Director: Bob Logue

OlyCAP/ 803 West Park Ave/ Port Townsend, WA 98368

Phone: 360-385-2571 ext. 6324 Fax: 360-385-5185 Email: blogue@olycap.org