



**Volunteer Services**  
**Araceli Duran-Vasquez, Volunteer Coordinator,**  
**830-258-7630**

Welcome to Volunteer Services at Peterson Regional Medical Center. Approximately 50-100 men and women work 1,500 to 2,000 volunteer hours each month in various service areas of the hospital and in community service projects. Gift Shop revenue and vendor sales enable the Auxiliary to contribute \$20,000 to \$30,000 each year to fund nursing scholarships and to purchase hospital equipment. The Administration and Board of Directors value your commitment to help others and support us in our endeavors. We reach out to patients, visitors, employees, staff and each other to enhance our patient's experience.

**INFORMATION FOR THE PROSPECTIVE VOLUNTEER**

**WHAT PRMC OFFERS TO YOU:**

- A free meal in the cafeteria either before or after your shift
- Attend the Spring Fling/Installation of Officers in May and the Awards Dinner in December (subject to change)
- An opportunity to share your life skills and experience in the performance of meaningful work
- An opportunity to make a difference in someone's daily life
- A friendly, professional environment in which to serve and socialize

**WHAT PRMC ASKS OF YOU:**

- Purchase your own uniform which consists of white pants or skirt, white shoes, a vest or smock (vests or smocks cost approximately \$25 - \$35) and a white shirt. White pants are available at Dickies.com.
- Wear only minimal jewelry and no fragrances.
- Become a member of the Auxiliary. There is a brief business meeting and a short program quarterly- Dates, Time, and Locations sent out beforehand.
- Work a minimum of 100 hours per year to be a member in good standing.
- Arrange for your own substitute when you cannot work.
- Read and abide by the Auxiliary By-Laws and Standing Rules and the PRMC Mission, Vision and Values.
- Follow the Volunteer's Code of Ethics while on duty.
- Respect all information as CONFIDENTIAL. "What you see, what you hear – when you leave, leave it here."
- Practice Universal/Standard Precautions (IF it's wet, don't touch it.) and good hand washing techniques (scrub for 15 seconds!).
- Perform your duties in a dependable and responsible manner and under the guidance of your supervisor.
- Although the need for such is extremely rare, PRMC reserves the right to deny assignment to an applicant and to terminate a volunteer when hospital policy is breached or compromised.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

# Adult Volunteer Application

Name \_\_\_\_\_

Date of Birth \_\_\_\_\_

Mailing Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Primary Phone \_\_\_\_\_  Hm  Cell

Secondary Phone \_\_\_\_\_  Hm  Cell

Male ( ) Female ( )

E-mail \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Relationship to you \_\_\_\_\_

Primary Phone \_\_\_\_\_  Hm  Cell  Wk

Secondary Phone \_\_\_\_\_  Hm  Cell  Wk

## Adult References (exclude relatives):

Name \_\_\_\_\_ Phone No. \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone No. \_\_\_\_\_ E-mail \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Previous work and/or volunteer experience \_\_\_\_\_

Education, training skills and interests \_\_\_\_\_

How did you discover our volunteer program? \_\_\_\_\_

What interests you and appeals to you about volunteering in a health care setting? \_\_\_\_\_

What do you hope to achieve through your volunteer experience? \_\_\_\_\_

Service areas that interest you  Patient Area  Clerical  Gift Shop  Information Desk  Crafts  Pastoral Care

Please indicate your availability:  Monday AM  Tuesday AM  Wednesday AM  Thursday AM  Friday AM  
(AM: 8am to 12pm PM: 12pm to 4pm)  Monday PM  Tuesday PM  Wednesday PM  Thursday PM  Friday PM

Upon acceptance to the volunteer program, I agree to give regular and dependable service to Peterson Regional Medical Center. I understand that I am willingly giving my time and talents to Peterson Regional Medical Center, without monetary compensation by the hospital.

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

The application process includes a personal interview, a criminal background check, checking of references, completing a TB screening and attending a general orientation. Upon acceptance, you will receive departmental orientation and training to enable you to perform your volunteer duties. Volunteers are expected to comply with hospital and department policies and guidelines.

## NOTIFICATION

Pursuant to the requirements of section 604 (b) of the Fair Credit Report Act, notice is hereby given to the undersigned that a consumer report (including a criminal background check and an education check) may be made in connection with the application for employment with Peterson Regional Medical Center.

I am entitled to know and am hereby advised that the nature and scope of the investigation will be to obtain applicable information about my previous employment, criminal background and education.

Notice is also given that in the event that such information has an adverse effect, either wholly or in part, upon consideration of my application, I am entitled to a copy of the report from the reporting agency and a statement of consumer rights.

I authorize that a consumer report, criminal background check, and education check be done in connection with my application for employment.

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**DATE**

\_\_\_\_\_  
**PRINTED NAME**

**Social Security Number:** \_\_\_\_\_

**Date of Birth:** \_\_\_\_\_

**Cities/Counties you have resided in for the past seven (7) years:**

\_\_\_\_\_/\_\_\_\_\_, \_\_\_\_/\_\_\_\_, \_\_\_\_/\_\_\_\_.

**Current Address:** \_\_\_\_\_  
City State Zip

**Home Phone:** \_\_\_\_\_

**Cell Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

## VOLUNTEER CODE OF ETHICS

Believing that the hospital has a real need of my services as a volunteer:

- I will be punctual and conscientious in the fulfillment of my duties as I understand that dependability is vital to my service;
- I will conduct myself with dignity, courtesy and consideration, always modeling the values, **“CALLING”**  
**Caring, Accountability, Leadership, Learning, Integrity, Nurturing, Going the extra mile.**
- I will consider as confidential all information which I may hear directly or indirectly concerning a patient, doctor or any personnel and will not seek information regarding a patient or read charts, records or reports under any circumstances;
- I will take my problems, criticisms or suggestions to the Volunteer Coordinator and will never discuss these concerns in front of or with patients, visitors or hospital staff;
- I will endeavor to be cheerful and pleasant at all times, to accept supervision graciously and to make my work of the highest quality;
- I understand that all hospital policies, procedures and guidelines are designed with a great deal of thought and reason and I will uphold these standards and interpret them favorably to the community at large;
- I will fulfill my commitment of service for the duration of the program and assume responsibility for my daily attendance.

I have read and understand the Code of Ethics and I will follow the guidelines to the best of my ability. I understand that a violation of any of the above commitments may result in termination of my service in the program.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date