

# The Village Common of Rhode Island

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*Aging Better Together*

## Volunteer Application

**PLEASE PRINT:**

**Local Village** \_\_\_\_\_ **Date** \_\_\_\_\_

**Name of Volunteer Ambassador** \_\_\_\_\_

### Contact Information

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Nickname \_\_\_\_\_

Language(s) spoken other than English \_\_\_\_\_

Address Line 1 \_\_\_\_\_

Address Line 2 \_\_\_\_\_

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

Home Phone (Landline) \_\_\_\_\_ Cell Phone \_\_\_\_\_

Preferred Phone for Contact (check one):      Home Phone (Landline) ☐      Cell Phone ☐

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

### Emergency Contact

First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_ Last Name \_\_\_\_\_

Home Phone (Landline) \_\_\_\_\_ Cell Phone \_\_\_\_\_

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

Relationship to Volunteer \_\_\_\_\_

## Additional Information

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

**Covid Vaccination Status (check all that apply):**

First dose(s) ☐      Booster ☐      Second Booster ☐      Third Booster ☐

**Is there any health reason that would limit your ability to volunteer?** ☐ Yes    ☐ No

If yes, please describe:

## Volunteer Opportunities

Some of the following volunteer opportunities provide services directly to members while others support operations. Refer to your volunteer handbook or contact your volunteer coordinator for more information.

**Check any of the following that you are interested in helping with:**

- ☐ Driver
  - ☐ Rides    ☐ Errands
- ☐ Event Planning
- ☐ Home Help
- ☐ Membership Ambassador
- ☐ Service Coordinator
- ☐ Steering Committee Member
- ☐ Technology Support
- ☐ Village Friends (calls or visits)

**Describe any previous volunteer experience (if any). If not applicable, enter N/A:**

## SUPPLEMENTAL SECTION FOR VILLAGE FRIENDS VOLUNTEERS

**Check which type of volunteer service you wish to provide:**

☐ Check-In Calls    ☐ Friendship Calls    ☐ Friendship Visits

**Are you:** ☐ working    ☐ retired    ☐ student    ☐ unemployed

☐ other: \_\_\_\_\_

Occupation: \_\_\_\_\_

Current Student Major (if applicable): \_\_\_\_\_

### Optional Information

**What are some activities you might like to do while visiting with a friend? For example, card games, coffee/tea, reading, crafts, walking, etc.**

**Please supply any other relevant information:**

## SUPPLEMENTAL SECTION FOR DRIVERS and THOSE PROVIDING ERRANDS

Are there any restrictions on your driver's license other than eyeglasses?

☐ Yes ☐ No If yes, please describe: \_\_\_\_\_

Please list the vehicle(s) you will use to provide transportation:

Model	Make	Year	Plate #	State

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

Is your vehicle used by a smoker? ☐ Yes ☐ No

Do you routinely have pets in your vehicle? ☐ Yes ☐ No

**I acknowledge that the information I have provided above is accurate and complete.**

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

By typing your name, you acknowledge it is the same as your signature.

**Please provide copies of the following documents with this application:**

- Driver's License
- Vehicle Registration
- Proof of Level of Vehicle Insurance and Effective Dates

## Volunteer Driver Availability

Please indicate your general availability for driving below.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
6 a.m. – noon							
noon – 6 p.m.							
6 p.m. – midnight							

## Background Check Authorization

All volunteers are required to authorize a standard background check for compliance and to ensure the safety of our members. Our background checks are conducted by Sterling Volunteers, a nationally trusted consumer reporting agency that prioritizes the security and confidentiality of all sensitive data. The online application just takes a few moments to complete. If you do not receive an invitation by email from Sterling Volunteers, please check your email spam folder.

## Confidentiality and Liability Waiver

### Confidentiality:

I agree to protect the confidentiality of all information pertaining to any of The Village Common of RI members, non-members or other volunteers or clients associated with The Village Common of RI.

### Liability:

I acknowledge that as a volunteer, I am not an employee of The Village Common of RI and further, I understand that I will not be paid for any work that I perform.

I further acknowledge and understand that The Village Common of RI carries general liability insurance, the intention of which is to provide protection for The Village Common of RI, its officers, employees, agents and its volunteers, against claims of loss, injury or other damages arising from The Village Common of RI operations, including those performed by our volunteers.

In addition, I acknowledge and affirm that, if my volunteer service will involve the use of my vehicle, I will provide a copy of a valid driver's license, current vehicle registration, and vehicle insurance policy to The Village Common of RI office; I understand it is the driver's responsibility to notify The Village Common of RI office of any changes and/or updates to these documents. I will carry the level of vehicle insurance on my vehicle that is required by The Village Common of RI and that, in the event of an accident involving my vehicle, my vehicle insurance will provide liability coverage for me as the driver of the vehicle.

Further, I fully and forever release and discharge The Village Common of RI, its officers, employees, agents and successors from personal loss, injury, or damages which I may incur in the course of my volunteer work.

**My signature below reflects my understanding of, and agreement to abide by, the Confidentiality and Liability Waiver statements above and acknowledge that I may be requested to authorize a background check of myself, depending on the kind of volunteer support that I will be providing.**

**Signature:**\_\_\_\_\_ **Date:**\_\_\_\_\_

## NEXT STEPS

You may submit your volunteer application by email or mail:

- Submit by email at [volunteer@villagecommonri.org](mailto:volunteer@villagecommonri.org).
- Submit by mail to 245 Waterman Street, Suite 406, Providence, RI 02906.

Once we receive your application, you will receive an email from **Sterling Volunteers** asking for your permission to complete our required background check. When you receive this email, click 'Order My Background Check', set up a username and password, and complete the short application that follows. If you need assistance, please call us at 401-228-8683.

Note that the Sterling application will ask you whether you would like to personally cover the cost of your background check, but this is NOT required.

You will also be contacted to attend a short orientation session, either on Zoom or in person.

Thank you for volunteering with The Village Common of Rhode Island!