

**Montmorency County Commission on Aging
Volunteer Registration/Application Form**

Name: _____ Today's Date: _____

Address: _____

City: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact Information:

Name: _____

Phone: _____ Relationship: _____

Are you currently employed? Yes _____ No _____

Employer: _____ Work Phone: _____

Occupation: _____ # of Years with Current Employer: _____

General Availability:

	Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.
From:							
To:							

Skills/Talents/Hobbies: _____

Please list any volunteer duties that you wish to be considered for: _____

Do you have any physical limitations that would affect your ability to perform volunteer duties?

Yes _____ No _____

Referred to MCCOA by: _____ Friend/Neighbor _____ Newspaper article _____ Other

Please list three Montmorency County references:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Transportation to Volunteer Jobs:

_____ I will drive my own vehicle

_____ A friend or family member will take me

Michigan Driver's License #: _____ **Expiration Date:** _____

I agree that if I use my personal vehicle for volunteer services, I will maintain a current, valid driver's license as well as vehicle insurance equal to or greater than the minimum limits required by the State of Michigan and will provide a copy to MCCOA.

Volunteer Applicant Name

Date

**MCCOA VOLUNTEER BACKGROUND CHECK
DISCLOSURE AND AUTHORIZATION**

Disclosure

The Montmorency County Commission on Aging (MCCOA) hereby discloses that it may conduct a background check for the purposes of considering your application for volunteering for the agency.

Authorization

I, _____, hereby authorize the Montmorency County Commission on Aging to conduct a background check at any time with the appropriate authorities (courts, police, and Department of Motor Vehicles) upon matters of record regarding my background. The information listed below that is needed to conduct my background check is accurate and complete.

Please Print:

_____ (First name)	_____ (M.I.)	_____ (Last name)
_____ (all former names used)		
_____ (Date of birth)	_____ Driver's License # & Expiration Date	

Today's Date

Signature

I understand that all information provided/obtained for/through any background checks will be kept strictly confidential.

Today's Date

Your Signature

MCCOA VOLUNTEER INTEREST FORM

Name: _____ **Today's Date:** _____

Phone: _____ **E-mail:** _____

Listed below are volunteer jobs for the various programs and activities sponsored by the Montmorency County Commission on Aging. Please check those for which you would be interested in possibly volunteering your time.

Advocacy

- Advocate for Seniors
- Refreshment, transportation
- Setup, cleanup for meetings

Friendly Visitor

- Atlanta
- Hillman
- Lewiston

Repair wooden steps, decks, or

- railings
- Repair wheelchair ramps
- Simple miscellaneous repairs

Chore Service

- Leaf Raking
- Packing/moving assistance
- Recruit chore volunteers
- Supervise chore volunteers
- Tree Shrub trimming
- Window Washing
- Yard Cleanup (spring/fall)

Garage Sale

- Bake sale table
- Cashier
- Food server
- Greeter
- Loading/unloading
- Make baked goods
- MCCOA sales table
- Table setup

Office Assistant

- Data base entries
- Distribute flyers
- Special event reminder calls
- Mailings assistance
- Receptionist
- Typing (Microsoft Word)

Commodities (Food distributions)

- Loading/Unloading

Holiday Decorations

- Color Easter Eggs
- Decorate cookies
- Decorate meal sites
- Make greeting cards
- Make table centerpieces

Reassurance Call Program (From Home)

- Substitute caller
- Volunteer contact
- Weekly caller

Computer Assistance

- Assist with computer and printer hookup/setup
- Assist with software downloads
- Tutoring

Medical Transportation

- Alpena
- Gaylord
- Grand Rapids
- Petoskey
- Traverse City
- U of M Medical Center
- Veterans Facilities

Research Program

- Mailings assistance
- Survey administration

Crafts Instructor

- List Craft _____

Snow Removal Program

- Snow blowing/plowing for Private residences

Entertainment

- Guitar
- Piano
- Other instruments
- Musical Group
- Vocal

Shopping Assistance

- Shop for homebound seniors

Fair Booth

- Material Creation
- Booth set up
- Booth personnel
- Booth tear down

MMAP (Medicare/Medicaid Assistance Program-32+ hours Training required/provided)

- MMAP Counselor

Tax Assistance Program (Feb.-April)

- Receptionist
- Tax preparer (training required/provided)

Minor Home Repairs Program

- Build Wheelchair ramps
- Caulk windows/doors
- Install grab bars
- Install smoke detectors
- Recruit minor home repairs volunteers
- Supervise minor home repairs volunteers

Other:

