



Made to Stay

SUPPORTING SENIORS TO STAY IN THEIR HOMES

Volunteer Application Form

Date: _____

Date of Birth: _____

Name: _____

E-mail: _____

Address: _____

Phone: Home: _____

Cell: _____

Preferred way for us to contact you: _____

Best time to contact you: _____

Service Areas

(please select any areas which best fit services you would prefer to do.)

- 1. Escorted transportation to medical appointments, shopping, errands, etc.
- 2. Helping our members with their weekly grocery shopping needs, with or without members.
- 3. Make friendly checks on members through daily or weekly home visits or phone calls.
- 4. Doing small home repairs. (there may be a cost to the member for materials)
- 5. Doing errands for homebound members.
- 6. Help in the **Made to Stay** office with answering phones, filing, mailings, etc.
- 7. Help members with organizing, reorganizing and downsizing (closets, medications, etc.)
- 8. Help with **Made to Stay** sponsored events and/or fundraisers. (give us your ideas)
- 9. Do yard work (mowing, raking, clearing walks, taking out trash)
- 10. Provide technical assistance (computer, phone, TV, etc.)
- 11. Assist with member's home/office needs. .
- 12. Assist members with meal preparation.

Previous volunteer experience: _____

Volunteering Opportunities

As a volunteer, you are never assigned to a member request. No one will call you asking you to take a request. We have a password protected page on our website where only volunteers have access. Each week, we post our member requests on that page with the date and time of the request. Our volunteers check the list, if there is a request that meets your available time, you can call our volunteer coordinator and let her know you will take that request. You then call our member the day before their request to let them know what time you will pick them up. You pick and choose what you want to do. If it's your first time, you may want to ride along with one of our volunteers as they fill a member request.

Please list three professional/personal references:

Name:	Phone Number:	Relationship:

I give permission for **Made to Stay** to perform a criminal background check and a driving history record check if deemed necessary. If you are willing to provide transportation, we will need a copy of your driver's license and your automobile insurance showing liability coverage and coverage for any passengers.

Signature: _____ Date: _____

I give permission to use my name and photo in ads, brochures, the website and any other publications of **Made to Stay**.

Signature: _____ Date: _____

**Send Application to: Made to Stay, 126 Cambridge Drive,
Paducah, KY 42001 or scan and email to: info@madetostay.org.**