

Volunteer Service Application



**Ronald
McDonald
House®**
Connecticut & Western
Massachusetts

Please complete this form and send it to the following address. Thank you!

Ronald McDonald House: New Haven
860 Howard Avenue, New Haven, CT 06519
Office: 203-777-5683

Applicant Information

Full Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Occupation: _____ Employer/School: _____

Emergency Contact:

Name: _____ Relationship: _____ Phone: _____

Volunteer Information - Please tell us about yourself

Give a short description of yourself and how you would like to participate in Ronald McDonald House activities (please include special skills/hobbies/trainings):

Please list any previous or current volunteer experience (Organization, nature of service, dates):

Volunteer Information

Have you had experience with supporting families with a medical or health situation, a seriously ill child, or the death of a child? If yes, please explain:

Yes No

Community support is essential for the continued success and support of Ronald McDonald House CTMA. Do you have any individuals, community or business connections that may be interested in supporting our mission? If yes, please explain:

Yes No

References

Please list three non-family references:

Full Name: _____	Relationship: _____
Company: _____	Phone: _____
Full Name: _____	Relationship: _____
Company: _____	Phone: _____
Full Name: _____	Relationship: _____
Company: _____	Phone: _____

Do you know someone who works with us?

Yes No

Name: _____

What are your personal expectations of this volunteer opportunity?

Shift Preferences and Availability

Sunday	<input type="checkbox"/> 11am - 2pm	<input type="checkbox"/> 2pm - 5pm	<input type="checkbox"/> 5pm - 8pm	Other times: _____
Monday	<input type="checkbox"/> 11am - 2pm	<input type="checkbox"/> 2pm - 5pm	<input type="checkbox"/> 5pm - 8pm	Other times: _____
Tuesday	<input type="checkbox"/> 11am - 2pm	<input type="checkbox"/> 2pm - 5pm	<input type="checkbox"/> 5pm - 8pm	Other times: _____
Wednesday	<input type="checkbox"/> 11am - 2pm	<input type="checkbox"/> 2pm - 5pm	<input type="checkbox"/> 5pm - 8pm	Other times: _____
Thursday	<input type="checkbox"/> 11am - 2pm	<input type="checkbox"/> 2pm - 5pm	<input type="checkbox"/> 5pm - 8pm	Other times: _____
Friday	<input type="checkbox"/> 11am - 2pm	<input type="checkbox"/> 2pm - 5pm	<input type="checkbox"/> 5pm - 8pm	Other times: _____
Saturday	<input type="checkbox"/> 11am - 2pm	<input type="checkbox"/> 2pm - 5pm	<input type="checkbox"/> 5pm - 8pm	Other times: _____

As a House volunteer, can you commit to at least 3 hours: Per week Every other week Per month

Disclaimer and Signature

Ronald McDonald House Connecticut and Western Massachusetts Volunteer Agreement

As a part of this Ronald McDonald House CTMA organization, I understand the following:

- I understand that the needs of the families take priority over any tasks..
- I will be provided with a copy of the House rules and I agree to read and follow them in order to support all guest families, their questions and their needs.
- I understand I may hear information about guest families and House visitors and I understand this information is private and confidential and I will not share this information outside of Ronald McDonald House CTMA.
- I understand that I may be asked to do any of the tasks listed on the Volunteer tasks list and agree to do them when asked.
- I understand that I may be asked to do any of the tasks listed on the volunteer tasks list and agree to do them when asked.
- I will support the needs of the families, House and I will ensure that I offer and complete tasks during my assigned shift at the location scheduled.
- I will keep all personal work spaces clean, sanitized and tidy, and will be respectful to all items, equipment and areas of the House.
- I understand that the computer at the front desk is for House related use only and personal use should be kept to a minimum.
- I acknowledge Ronald McDonald House: New Haven is a non smoking facility and will abide by this rule.
- I will uphold all of the policies of the House whether or not I agree with them.

If I fail to abide by these rules, I may be asked not to volunteer any longer.

The House staff reserves the right to make exceptions or changes to these rules at any time, for any reason.

I have read the information that I have provided and it is true. I voluntarily offer my services with a clear understanding that there will be no monetary compensation; I will be prompt and regular in my service; I will notify the appropriate person if I am unable to perform my volunteer duties as assigned. All applicants are required to have a background check. I agree to conform to all policies and regulations as states in our volunteer and House operational manual.

Signature: _____

Date: _____