



RONALD MCDONALD HOUSE CHARITIES ANN ARBOR

VOLUNTEER APPLICATION

We hope that the Ronald McDonald House Charities Ann Arbor (RMHCAA) is a good match for your time and energy! Please complete this application and email it to Development & Community Partnerships Manager, Mary Moffett at mmoffett@rmhcannarbor.org. You must be 18-years-old and provide verification of COVID-19 and influenza vaccinations to apply. Thank you for your support!

PERSONAL INFORMATION

Last Name	First Name	M.I
Current Street Address	City/State	Zip Code
Permanent Street Address	City/State	Zip Code
Cell Phone	Work Phone	Home Phone
Email	Date of Birth (MM/DD/YYYY)	
How did you hear about volunteering at RMHCAA? _____		
Why do you want to volunteer? _____		

CURRENT STATUS

- Community Resident
 Student

School: _____

EMPLOYMENT INFORMATION

Employer	Address	Phone Number
May we contact your work regarding your volunteer activities? _____ Yes _____ No		

BACKGROUND CHECK INFORMATION

RMHCAA will conduct a background check for all volunteers before they can begin working in the house. **Note we are unable to accept court mandated hours.**

Have you ever been convicted of a crime? _____ Yes _____ No

Are there any felony charges pending against you? _____ Yes _____ No

VOLUNTEER EXPERIENCE

Organization	Role	Dates: From/To
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Organization _____ Role _____ Dates: From/To _____

SPECIAL SKILLS & INTERESTS

Please list any special skills or interests:

____ Language (please specify) _____

VOLUNTEER AVAILABILITY

Please indicate all days and shifts you are available to volunteer. We will do our best to match your availability with our needs.

____ Monday ____ 9 am-11 noon ____ 12noon-2 pm ____ 3:30 pm-5:30 pm ____ 6-8 pm (Cart only)

____ Tuesday ____ 9 am-11 noon ____ 12noon-2 pm ____ 3:30 pm-5:30 pm ____ 6-8 pm (Cart only)

____ Wednesday ____ 9 am-11 noon ____ 12noon-2 pm ____ 3:30 pm-5:30 pm ____ 6-8 pm (Cart only)

____ Thursday ____ 9 am-11 noon ____ 12noon-2 pm ____ 3:30 pm-5:30 pm ____ 6-8 pm (Cart only)

____ Friday ____ 9 am-11 noon ____ 12noon-2 pm ____ 3:30 pm-5:30 pm ____ 6-8 pm (Cart only)

____ Saturday ____ 9 am-11 noon ____ 12noon-2 pm ____ 3:30 pm-5:30 pm

____ Sunday ____ 9 am-11 noon ____ 12noon-2 pm ____ 3:30 pm-5:30 pm

I can work: ____ every other week ____ every week

Location: ____ Main House (on Washington Heights) ____ Hospitality a la Carte (inside C.S. Mott Children's)

EMERGENCY CONTACT INFORMATION

Name _____ Relationship _____ Phone Number _____

Name _____ Relationship _____ Phone Number _____

COMMITMENT

I understand that commitment is the foundation for success of any volunteer program. I agree to serve as a volunteer for Ronald McDonald House Charities Ann Arbor for a minimum of **a full year (or two consecutive semesters if I am a student)**. I further agree to discuss and/or notify the Program Services Manager prior to making any changes to my volunteer placement schedule (i.e. number of shifts, number of hours).

The Ronald McDonald House Charities Ann Arbor reserves the right to suspend or terminate a volunteer if it is discovered they made false statements during the application process or at any time during their commitment they violate any House or Hospital policies and procedures.

I certify that the responses on this document are true to the best of my knowledge. I agree that this information may be verified and references contacted.

Signature: _____ Date _____