



Volunteer Application

Basic Information

Name

Street Address

City

State

Zip

Home Phone

Cell Phone

Email

How did you find out about volunteering for At Home by High?

Volunteer Skills and Interests

What are your interests and hobbies?

Do you have previous volunteer experience? If so, please describe the organization(s) and your role:

Volunteer Availability

How often would you like to volunteer? (Circle the most likely)

1 x week

2 x week

2 x month

1 x month

Other:

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Morning (8am-12pm)							
Afternoon (12pm-5pm)							
Evening (5pm-9pm)							

Comments:

Volunteer Opportunities Available (select all opportunities of interest)

Home Services

*Computer/technology assistance

*Handy services (change lightbulbs, fix stuck windows, move furniture, etc)

*Help with reading/writing mail or bills

*Organizing (paperwork, clothing, storage, etc)

Snow removal

Yard work and gardening

*Carrying / lifting / moving items

Friendly Visits and Check-ins

Check-in calls (approx. 15 minutes daily or weekly depending on need)

*Companionship visits (approx. 30-60 minutes)

*Short walks

Transportation (additional application information required – see Appendix A)

*Transportation Assistance (errands or leisure)

*Transportation Assistance for medical appointments

Run errands for member (pick up prescriptions, post office, etc.)

Grocery or meal delivery

Pet Care

*Care for cat(s) while member is unable to do so

*Care for dog(s) while member is unable to do so

*Care for another type of pet (e.g., bird, aquarium...) when a member is unable to do so

*Dog walking

Wellness Activities

Lead group walks other physical activities (biking, etc)

Note-taking at medical appointments

Offer exercise classes or group activities (yoga, tai chi, etc)

Offer nutrition or cooking classes

At Home by High Administrative and Program Support

Communications support (newsletter, mailings, publicity, social media)

Data entry support

Event day-of support

Event photographer

Event planning support

Fundraising support

Host event or activity (business or private residence)

Speaker or educator for an event

Volunteer coordination support

Other:

* This activity will require a background check prior to a volunteer assignment. See Page 4.

References

1. Name:	Phone	Email
Relationship:		
2. Name:	Phone	Email
Relationship:		

Emergency Contacts

1. Name:	Phone
Relationship:	
2. Name:	Phone
Relationship:	

Photograph/Video Release

We ask for your permission to use a photograph or video recording of you in our marketing materials. Photographs or video may be used in both print and digital media. At Home by High's print publications include, but are not limited to: newsletters, brochures, annual reports, marketing materials, bulletin boards, and other displays. At Home by High's digital and multi-media publications include, but are not limited to: slideshows, websites, social media sites such as Facebook and Instagram, videos and YouTube. This release will be kept by the Executive Director of At Home by High. Concerns should be directed to this position. I hereby grant At Home by High the irrevocable and unrestricted right to use and publish photographs or other images of me in any print, electronic, digital or other media for any legitimate purpose; and to alter the same without restriction. I irrevocably assign such photographs' and images' rights and uses to At Home by High into perpetuity. I hereby release At Home by High, its staff and representatives from all claims and liabilities relating to said photographs and images. I hereby waive the right to inspect or approve my image or any finished materials that incorporate my image. I also understand that I will receive no compensation in connection with the use of my image.

Printed Name : _____ Date: _____

Signature: _____

Please initial one of the following:

____ I agree to the above statement.

____ I disagree to the above statement and do not provide consent to use my image.

Background Check

We are required to perform a background check on all volunteers who will enter the homes of At Home by High members or assist them with transportation. This protects us, you, and our members. Your personal information and the results of your check will not be shared with anyone outside the immediate At Home by High staff and board. They will be stored in a secure location.

Background check paperwork will be completed during volunteer training. However, if you have had a background check conducted within the last year, you can have your employer or other volunteer agency forward a copy to: **At Home by High**, 184 E. 3rd Ave, Columbus, OH 43201 or katie.beaumont@athomebyhigh.org.

_____ I will need to complete a background check.

_____ I should have a current background check on-file and will have it forwarded to AHBH.

Volunteer Driver Additional Information

Driver's License Number	Expiration	Car Insurance Company	Ins. Expiration
What type of vehicle will you have available?			
	2 Door Sedan		SUV
	4 Door Sedan		Mini Van
	Other, please specify:		
Please submit the following documentation with your application to become a volunteer driver:			
	Photocopy of your valid driver's license		
	Current proof of insurance		

Please scan and email completed applications to katie.beaumont@athomebyhigh.org or mail a completed hardcopy application to:

At Home by High
 184 E. 3rd Avenue
 Columbus, OH 43201

Questions about the application?

Please contact At Home by High at katie.beaumont@athomebyhigh.org or by calling 614-397-6661.