

Volunteer Application

Complete paper application form and mail to: Anderson Valley Village
 P.O. Box 576
 Boonville, CA 95415

Informal Interview

You will participate in an informal chat (which may be by phone or in person) so that AVV gets to know you. We want to ensure that your volunteer activities will serve AVV and also be fulfilling for you.

Background Check

Each volunteer will be asked to undergo a reference check. If you are volunteering to drive a DMV check will be needed, including a copy of your **driving record**, which we can do for free through our insurance company or it can be accessed online <https://www.dmv.ca.gov/portal/dmv/detail/online/dr/welcome> (\$2) or in person at the DMV (\$5) or by mail (\$5). And potential drivers will be asked to furnish copies of your **driver’s license** and **proof of insurance** (it can be a photo emailed or texted to the coordinator).

Orientation and Training

Each volunteer will receive orientation and training prior to the commencement of their service with AVV. During the orientation we will discuss how the village works and what the expectations, rights and responsibilities of an AVV volunteer are. You will also find out about what is expected of drivers and those interacting directly with members.

During the training portion we will address the use of the AVV website and the procedures for accepting a volunteer opportunity. Attendees will also receive copies of the AV Volunteer Handbook Part A and B to be reviewed together.

VOLUNTEER APPLICATION			
APPLICANT INFORMATION			
First Name:	Middle Name:	Last Name:	
Do you have a preferred nick name?			
Gender Female <input type="checkbox"/> Male <input type="checkbox"/>			
Address:	City:	State: CA	ZIP Code:
How long have you lived at this address?			
Home Phone: ()		Cell Phone: ()	
Email:			
What is the best way to contact you? <i>(please circle)</i> Email Home phone Cell Phone Mail Text			
What languages do you speak? _____			
Are you a member of Anderson Valley Village <input type="checkbox"/> Yes <input type="checkbox"/> No			

PLEASE CHECK THE OPPORTUNITIES THAT INTEREST YOU	
Volunteer with members	
<i>Assistance with electronics</i>	<i>Personal Services</i>
<input type="checkbox"/> Configure cell phone <input type="checkbox"/> Mac help <input type="checkbox"/> PC help	<input type="checkbox"/> Daily check-in calls or visit
<input type="checkbox"/> Install a printer /Set up TV/ remote control	<input type="checkbox"/> Decluttering / Downsizing
<input type="checkbox"/> Use social media	<input type="checkbox"/> Doctor visit - friend / advocate
<i>Home Maintenance</i>	<input type="checkbox"/> Evaluating contractor proposal
<input type="checkbox"/> Gardening/ Weed whacking	<input type="checkbox"/> House watching
<input type="checkbox"/> Home safety check	<input type="checkbox"/> Mailing packages/run errands/p/u prescriptions
<input type="checkbox"/> Mending/Sewing	<input type="checkbox"/> Meal preparation
<input type="checkbox"/> Minor repair	<input type="checkbox"/> Preparing for a hospital visit
<input type="checkbox"/> Occasional housekeeping chores	<input type="checkbox"/> Reading, interpreting documents, organizing mail
<i>Pet Care</i>	<input type="checkbox"/> Reading aloud for pleasure
<input type="checkbox"/> Feed Pet	<input type="checkbox"/> Shopping assistance
<input type="checkbox"/> Take pet to vet	<input type="checkbox"/> Translation
<input type="checkbox"/> Walk the dog	<input type="checkbox"/> Walking companion
<i>Support</i>	<i>Transportation</i>
<input type="checkbox"/> Respite care for care givers	<input type="checkbox"/> Event/errands/medical appt./grocery transportation
Volunteer Locations	
<input type="checkbox"/> Boonville	<input type="checkbox"/> Navarro
<input type="checkbox"/> Philo	<input type="checkbox"/> Yorkville
Organizational and Village Support	
<i>Office Time</i>	<i>Village Outreach</i>
<input type="checkbox"/> Office support	<input type="checkbox"/> Outreach -(speaking/writing/editing,social media)
<input type="checkbox"/> Assist with member and volunteer orientation	<input type="checkbox"/> Host social events
<i>Organizational Support</i>	
<input type="checkbox"/> Village Committee (events/programs/fundraising/interest group)	<input type="checkbox"/> Legal support
<input type="checkbox"/> Board of Directors	<input type="checkbox"/> Other _____

Volunteer to Drive
Errand-running and transportation assistance is frequently requested by members.
Do you own your own vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, is the vehicle properly maintained and does it meet safety requirements? <input type="checkbox"/> Yes <input type="checkbox"/> No For example: seatbelts, airbags, braking, oil changes regularly, etc.
<input type="checkbox"/> Anderson Valley <input type="checkbox"/> Ukiah <input type="checkbox"/> Ft Bragg <input type="checkbox"/> Santa Rosa

BACKGROUND SCREENING

Please provide any other information you wish to share. For example: special skills, hobbies, reasons for volunteering.

For everyone’s safety, all volunteers will have their references checked and will need to provide their DMV records. (see Background Check above for more information)

California Drivers’ License Number: _____ Auto Insurance Carrier _____

Policy Number _____

We will need a copy of your auto insurance and Driver's License if you will be transporting AVV members

REFERENCES	
Two references are required.	
Name _____	Phone (____) _____ Email _____
How long have you known this person? _____	In what capacity? _____
Name _____	Phone (____) _____ Email _____
How long have you known this person? _____	In what capacity? _____

EMERGENCY CONTACT INFORMATION

Local contact:

Name: _____ Phone _____ Relationship _____
Phone (____) _____ Home/Cell/Work Phone (____) _____ Home/Cell/Work

Optional contact:

Name: _____ Phone _____ Relationship _____
Phone (____) _____ Home/Cell/Work Phone (____) _____ Home/Cell/Work

SIGNATURE

Signature of applicant: _____	Date: _____
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ATTACHMENT
CONFIDENTIALITY ACKNOWLEDGEMENT & AGREEMENT

During the course of your activity with Anderson Valley Village, you may have access to information which is confidential and may not be disclosed except as permitted or required by law and in accord with Anderson Valley Village policies and procedures. In order for Anderson Valley Village to properly assist members and engage in successful business planning, certain information must remain confidential. Improper disclosure of confidential information can cause irreparable damage to Anderson Valley Village. Confidential information includes, but is not limited to:

1. Medical and certain other personal information about members.
2. Reports, policies and procedures, marketing or financial information, and other information related to the business of services of Anderson Valley Village, which has not previously been released to the public at large by a duly authorized representative of Anderson Valley Village.

If you have any questions at any time concerning the confidentiality or disclosure of information, please contact Anderson Valley Village at 707-684-9829.

By initialing each section and signing this Confidentiality Acknowledgment, you acknowledge and agree that:

_____ 1. I will only access business information for which I have a legitimate business purpose.

_____ 2. Medical Information is confidential and my access is restricted to my legitimate medical need to know for diagnosis, treatment and care of a particular member.

_____ 3. I am obligated to hold confidential information in the strictest confidence and not to disclose the information to any person or in any manner which is inconsistent with applicable policies and procedures of Anderson Valley Village.

I HAVE READ AND UNDERSTAND THIS CONFIDENTIALITY AGREEMENT AND HAVE HAD MY QUESTIONS FULLY ADDRESSED.

Volunteer Signature _____

Print Name _____ Date _____