



# Volunteer Application

1045 Hill Street, Watertown, WI 53098  
Sandi Budewitz, Volunteer Services Coordinator  
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**General Information** Title: Mr. \_\_\_\_\_ Mrs. \_\_\_\_\_ Miss \_\_\_\_\_ Ms \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email Address \_\_\_\_\_

Which do you prefer we use (circle one): Home phone Cell phone Email

Birthday (Month, Day, Year) \_\_\_\_\_

Did someone refer you to our volunteer program? If yes, who? \_\_\_\_\_

**Emergency Contact** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Volunteer Experience** \_\_\_\_\_

\_\_\_\_\_

**Education/Special training/Skills** \_\_\_\_\_

\_\_\_\_\_

Any physical limitations? \_\_\_\_\_

Availability: Please place an X for the days and hours you would like to volunteer.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

References (please list two, personal or professional):

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

**Volunteer Opportunities:** Please check all areas in which you are interested.

- Clerical (filing, folding, attaching labels, etc.)
- 1 to 1 visits with residents
- Computer data entry
- Hospice (visiting/reading/ or companionship for patients), clerical tasks
- Knitting or crocheting prayer shawls or other projects
- Play bingo, games or cards
- Seasonal decorating
- Assist with or escort for events, activities, Worship services
- Pet visits
- Provide entertainment (sing, play an instrument, share travel slides, etc.)
- Interpreter- other language spoken \_\_\_\_\_  read  write
- Therapy assistant
- Welcome desk ambassador
- Concierge
- Gardening
- Music & Memory (download music, assist residents and/or staff)

*As a volunteer, I agree to abide by the policies and procedures set forth by Marquardt Village. All of the above information is true and correct to the best of my knowledge. I understand that providing false information on this application is reason for being denied or terminated as a volunteer. I understand that Marquardt Village requires a criminal/background check on volunteer applicants and I grant my permission for this check. It is my responsibility to report any changes to information provided on this application.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent or Guardian (if applicant is under 18 years old)

\_\_\_\_\_ Date \_\_\_\_\_