



**~VOLUNTEER APPLICATION ~**

*“In the end, it's not the years in your life that count. It's the life in your years.” -Abraham Lincoln*  
We welcome those who would like to enhance the lives of our residents through volunteering their time and talents. Please fill out the information below and submit via mail or e-mail to: Alexis Schwartzkopf, Activity Director [allys@iowaoeshome.com](mailto:allys@iowaoeshome.com) -Thank you

Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Frequency you wish to volunteer:

\_\_\_\_\_ Twice a week \_\_\_\_\_ Once a week \_\_\_\_\_ Every 2 weeks \_\_\_\_\_ Once a month

If none of the above apply please describe how you wish to volunteer below:

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Time preference:

\_\_\_\_\_ Morning \_\_\_\_\_ Afternoon \_\_\_\_\_ Evening

Weekends: \_\_\_\_\_ Weekdays: M T W R F

How long do you plan to volunteer? \_\_\_\_\_

Are there any skills from previous experiences you would care to use in volunteer work: (other languages, hobbies, talents, musical attributes, etc.)

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How or where do you wish to serve? (Residential, Health Care, Assisted Living, Chapel, Etc.)

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Why do you want to volunteer? \_\_\_\_\_

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Please list 3 personal and/or professional references including phone numbers and e-mail that we may contact.

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