

CancerLifeline

Optimizing the quality of life for all people living with cancer...patients, friends, family and coworkers

VOLUNTEER APPLICATION

Thank you for your interest in volunteering with Cancer Lifeline.
Please return completed application to:

Cancer Lifeline
Attn: Lisa Gardner
6522 Fremont Ave. N
Seattle, WA 98103

CONTACT INFORMATION

Please fill out completely.

First Name: _____ M.I. ____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____ Birth date (for criminal history check): _____

Home Phone: (____) _____ Work Phone: (____) _____ Cell Phone: (____) _____

Emergency Contact: _____ Phone: (____) _____

TYPE OF VOLUNTEER

Please select the opportunity that best fits with your skills, availability and interest. Check all that apply.

Administrative Volunteer:

Administrative volunteers receive periodic emails notifying them of volunteer opportunities. They are responsible for selecting the projects that interest them and contacting the appropriate staff member. Please see Administrative Volunteer job description for more details.

The majority of administrative volunteers work at the Dorothy S. O'Brien Center and there are very limited opportunities to volunteer at our other sites. If you have a special interest in volunteering at one of our other sites, please list your preferences below:

Lifeline Volunteer:

Lifeline volunteers provide emotional support, information and resources to people living affected by cancer. They are responsible for participating in our 30-hour training program and staffing four shifts per month. Shifts are usually taken on volunteer's home phone. Please see Lifeline Volunteer job description for more details.

AVAILABILITY

Please check all that apply.

Which **day(s)** during the week do you prefer?

- I am flexible Weekdays Weekends (Note: Most Administrative volunteers work Mon-Fri)

What **time(s)** do you prefer (please check all that apply)?

- I am flexible Mornings Afternoons Evenings

When are you available to begin volunteering? _____

ADMINISTRATIVE SKILLS

Please circle your skill level. This section is for Administrative Volunteers only.

	Least Proficient					Most Proficient	
<input type="checkbox"/> Computer:							
▪ Word Processing	1	2	3	4	5	N/A	
▪ Spreadsheets		1	2	3	4	5	N/A
▪ Data Entry	1	2	3	4	5	N/A	
▪ Database Design	1	2	3	4	5	N/A	
▪ Website Maintenance		1	2	3	4	5	N/A
▪ Graphic Design		1	2	3	4	5	N/A
<input type="checkbox"/> Office Tasks:							
▪ Filing & Organizing		1	2	3	4	5	N/A
▪ Writing/Editing		1	2	3	4	5	N/A
▪ Making Copies		1	2	3	4	5	N/A
▪ Front Desk/Telephone skills		1	2	3	4	5	N/A

Other skills/interests: _____

GETTING TO KNOW YOU

*Please list two personal or professional references (other than family).
You must provide an email address for your references.*

1. Name: _____ Relationship: _____
Email: _____

2. Name: _____ Relationship: _____
Email: _____

I certify that all information given on this volunteer application is true, complete and correct. I authorize Cancer Lifeline to contact the references provided and to conduct a Washington State Patrol Criminal History check. I understand that any false information on this application is cause for termination as a Cancer Lifeline volunteer. I also understand that any behavior deemed intolerable, rude or unjustified is also cause for termination. I have reviewed and agree to follow Cancer Lifeline's confidentiality policy. I am aware that any breach of confidentiality may result in disciplinary action including discharge from employment, termination of contractual arrangements, or being asked to end volunteer relationship with Cancer Lifeline.

Signed: _____ **Date:** _____