



Application for Volunteerism

The UNC Health Blue Ridge Volunteer Program is a year-round initiative open to individuals at least 18+ years of age looking to dedicate their time and talents to support organizational volunteer service roles. The spirit of this program is to engage in volunteerism with a scheduled commitment on an ongoing basis, to promote appreciation for diversity and inclusion in our community, and to foster a culture of compassionate citizens with a lifelong appreciation for giving back. UNC Health Blue Ridge ensures all applicants equal opportunity and consideration for volunteerism. They do not discriminate based on age, race, color, religion, gender, national origin, disability, Vietnam-era veteran status, or any other legally protected status.



Your Name: _____

Hello Applicant.

Last

First

M.I.

Mailing Address: _____

Street Address

Apartment/Unit #

City

State

Zip Code

Phone: _____

Email: _____

Check your email daily? YES NO

Receive text communications? YES NO

Explore your passion for volunteerism with us.

Are You Employed? _____

If yes, Organization/Role: _____

List any relatives currently employed by UNC Health Blue Ridge or Affiliate. Please include name, relationship, and facility/department:

Name	Relationship	Facility/Department

Have you ever been convicted of any criminal violation of the law (misdemeanor, alcohol or drug-related traffic, or felony), or are you now under pending investigation of charges for breach of any criminal law?

- YES
- NO

If yes, please explain:

Have you ever been the subject of any adverse action(s) by any duly authorized sanctioning or disciplinary agency for either conduct based on performance-based measures?

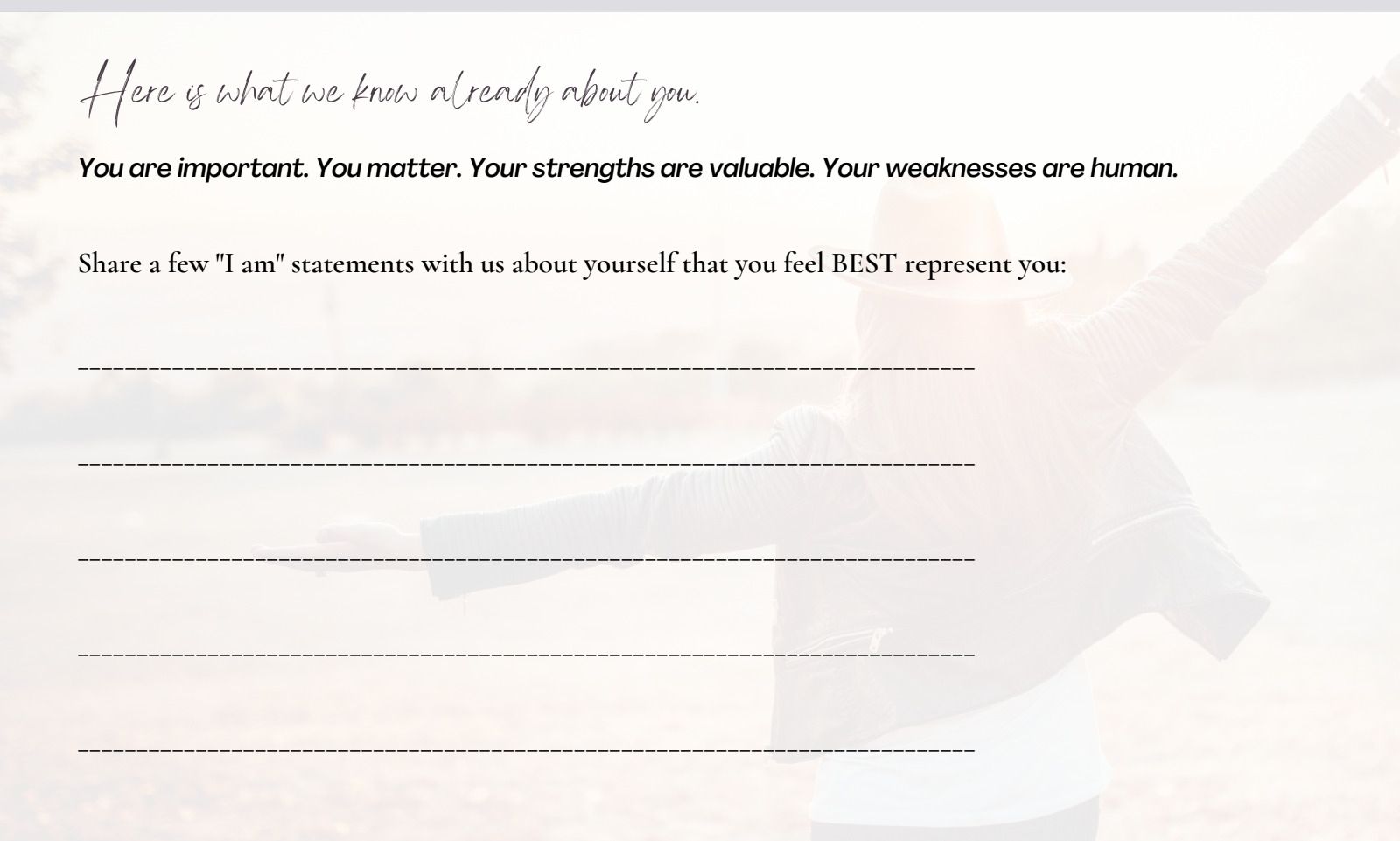
- YES
- NO

If yes, please explain:

Here is what we know already about you.

You are important. You matter. Your strengths are valuable. Your weaknesses are human.

Share a few "I am" statements with us about yourself that you feel BEST represent you:



Emergency Contact:

Last

First

M.I.

Cell Phone:

Alternate Phone:

Share One Quick Reference:

Name of Individual

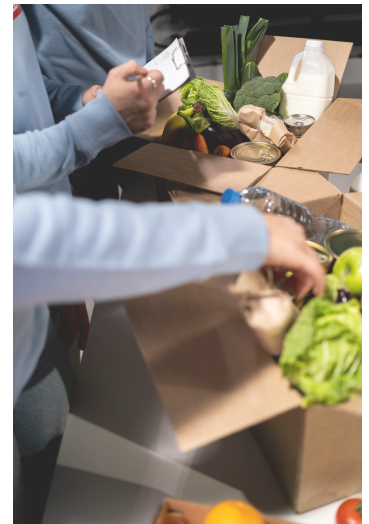
Contact Number: -----

Email: -----

Who Is Your Reference (colleague, personal friend, community leader, etc.):

A Few Benefits of Volunteering

- It builds character and promotes change.
- It broadens your social circle.
- It gives you self-confidence and makes you feel happier.
- It helps you learn to relate to people from various backgrounds and generations.
- It provides exposure to real-life experiences.
- It helps you to support and contribute to societal needs.
- Discover where your passions lie.



Let us know how you learned about becoming a volunteer at UNC Health Blue Ridge (circle one):

- Brochure
- Social Media
- Google
- Family/Friends
- Blue Ridge Foundation
- Other -----

List other source

PLEASE READ CAREFULLY BEFORE SIGNING

I hereby certify that all the information I have provided in this application is true and accurate to the best of my knowledge. I understand that falsification, misrepresentation, or concealment of any information in the application will disqualify me from volunteering. It may result in my immediate discharge if discovered at a later date.

Except as otherwise noted on this application, I authorize the facilities to contact employers and references named by me and allow those employers and references to give the Facilities any and all information concerning my history. I understand that the Facilities may act on the information received from these references at its discretion. I hereby release the Facilities and all previous employers and references from any liability in furnishing or using this information.

I hereby authorize the Facilities and/or its authorized agents to make an independent investigation of my background, reference, character, past employment, education, criminal or police records, including those maintained by both public and private organizations, and all public records to confirm the information contained on my Application for Volunteerism and/or obtain other information which is material to my qualifications for volunteerism. I understand that my application will not be considered complete until the conclusion of any required or necessary investigations, examinations, or inquiries, including receipt by the Facilities of any related reports or results. I understand that the Facilities may act on these reports or results and release the Facilities and all providers of the information from any liability in furnishing or using this information.

I understand that I may be asked to demonstrate how to do the essential functions of the chosen service. I believe I can fulfill the duties of a hospital volunteer with reasonable accommodation.

I understand that I may be asked to provide a physician's statement acknowledging that it is safe for me to undertake the activities associated with being a UNC Health Blue Ridge volunteer if I have a medical condition or am undergoing any treatment that limits my ability to conduct volunteer duties.

This application will remain active for 90 days. I understand if I am not selected to volunteer within 90 days, this application is no longer active, and I must reapply for volunteerism if I wish to be considered.

Signature: _____ Date: _____

Print Name: _____

CONFIDENTIALITY/HIPPA STATEMENT

I recognize and acknowledge that I may have access to confidential information regarding UNC Health Blue Ridge, patients, residents, doctors, employees, or others. Such information must not be discussed except as necessary in the performance of my services/duties. Therefore, except as directed by my director, I will not at any time disclose any confidential information (be particularly careful about the conversation in cafeteria, elevators, and other public places) to any person whatsoever or permit any person to examine or make copies of any information coming into my control. Disclosure of such information may result in the termination of my services.

Signature: _____ Date: _____

Print Name: _____

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Would you like to learn about volunteering
at UNC Health Blue Ridge?

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