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West Park Manor Personal Care Home, Inc.

**Student Volunteer Application Form**

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Date: \_\_\_\_\_ Email id: \_\_\_\_\_

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

Address: \_\_\_\_\_

Language Spoken: \_\_\_\_\_

Date of Birth: M    D    Y

Special Skills:

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Hobbies & Interests:

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Days & Times Available: \_\_\_\_\_

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

Parent or Guardian Signature: \_\_\_\_\_

References: \_\_\_\_\_ Phone # \_\_\_\_\_

\_\_\_\_\_ Phone # \_\_\_\_\_

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**FOR OFFICE USE ONLY**

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Date of Interview: \_\_\_\_\_ Interviewed by: \_\_\_\_\_

Volunteer Job Preferences: (1) \_\_\_\_\_

(2) \_\_\_\_\_

(3) \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

Assignment: \_\_\_\_\_ Supervised by: \_\_\_\_\_

Starting Date: \_\_\_\_\_ Length of Commitment: \_\_\_\_\_

Evaluation Dates: (1) \_\_\_\_\_ (2) \_\_\_\_\_

(3) \_\_\_\_\_ (4) \_\_\_\_\_

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