We are delighted you are interested in volunteering at Conway Regional!

Volunteers serve by:
- Escorting patients and visitors
- Driving our courtesy golf cart
- Delivering mail, flowers and gifts
- Finding a patient location
- Answering the phone
- Assisting in the hospital gift shop
- Welcoming patients to registration
- Clerical tasks such as scanning, filing, filling literature racks, and alphabetizing

Volunteers are not involved in any way in direct patient care. These tasks must be performed by licensed employees; it is the law.

The volunteer assignments we list on the sheet enclosed are the opportunities currently available. We cannot create opportunities based on your needs or interests.

Volunteering is not an avenue to paid employment. If you have applications on file you will not be considered for a volunteer assignment.

We do not place anyone to complete court ordered service, to serve only a specified number of hours, or to complete an individual project.

We ask for a three month commitment to weekly service. Volunteers are placed in a specific assignment; they do not rotate through a variety of areas. Assignments are primarily during the work week and customary work hours:

8:30 AM – 12:30 PM, 12:30 PM – 4:30 PM, Monday – Friday

You will be required to complete a TB skin test, formal annual training, and to comply with Conway Regional’s policies as you serve.

Our volunteers are members of our team and very valued; we hope to welcome you to the team as well.
CONWAY REGIONAL VOLUNTEER SERVICES

Please read and complete all attached documents; we do not process incomplete applications, and do not consider anyone for a volunteer position who has applications for paid employment on file.

DATE __________

First Name ___________________ Middle ___________________ Last ___________________
Please give us your full legal name to expedite your background check

E Mail Address ___________________ Phone ___________________
Address _______________________ City __________ State: ___ Zip _______

Have you ever been convicted of a crime? Yes _____ No _____ If yes, what was the crime
_____________________________________________________________

Have you volunteered elsewhere? Yes _____ No _____
Organization ___________________ Supervisor ___________________ Phone _______

REFERENCES:
Please choose references who can be reached during normal business hours and are not related to you.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>How do You know them?</th>
<th>Daytime Contact number</th>
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Relatives or friends associated with CRHS (i.e. employees, other volunteers, physicians)

__________________________________________________________________________

I am able to serve one scheduled four hour shift per week over three consecutive months. Yes _____ No _____
I heard about the program from ______________________________________

Please be aware our assignments fill quickly, and what you request may not be available when your application is received.

Preferred to serve ______________
Preferred Shift: __ 8:30 AM – 12:30 PM ___ 12:30 PM – 4:30 PM
If your choice is not available can you flex to another day or time? Yes __ No __

Please list areas from our open assignments sheet where you might be interested in serving as a volunteer.
1. __________________________
2. __________________________
3. __________________________

Is there any other information you would like to share that will help us place you in an assignment? ______________________________________________________

Conway Regional conducts criminal background checks on everyone to ensure the safety of our patients. These checks require your social security number and full birthdate as requested below. You are not required to provide this information however you will not be invited to serve as a volunteer without a background check.
The Volunteer Services Department is not obligated to provide placement nor are you obligated to accept the position you are offered. Volunteering opportunities are provided without regard to race, creed, national origin or gender. Volunteer positions require that you be 18 years of age or older.

Social Security Number _____ / ___ / ____ Birth Date ____/____/______

The information I have provided is accurate to the best of my knowledge.

__________________________    _________________
Name         Date