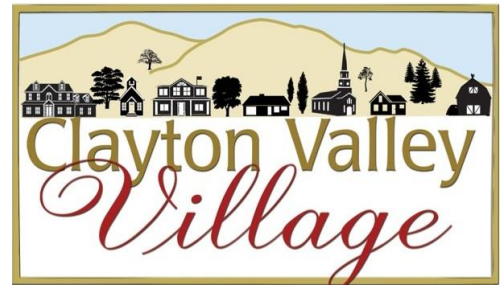


# Volunteer Application



## Personal Information:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I.: \_\_\_\_\_

Date of Birth: \_\_\_/\_\_\_/\_\_\_\_\_ Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

## In case of emergency, we have your permission to contact:

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

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## Personal references:

- Required (2)
- No relatives

We kindly request you notify your references in advance to inform them about Clayton Valley Village and your interest in volunteering.

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

## How did you hear about Clayton Valley Village? (Please check all that apply)

- I am a Clayton Valley Village Member  Family/friend  Community Meetings  Media/news article
- Clayton Valley Village website  Other Website (please identify): \_\_\_\_\_
- Other (please identify): \_\_\_\_\_

## Volunteer opportunities at Clayton Valley Village (check areas of interest):

- Home**  
(Example: Light Yard Work, Replace Light Bulbs, Flip Mattress, Simple House Maintenance Smoke Detector Check, Minor Plumbing Problems, Thermostat Reset, Pet Care [feed animals, dog walking, pet clean up], Daily Phone Check-Ins, In-home Visits)
- Transportation** (*Requires copy of driver's license & car insurance, & clean driving record.*)  
(Example: Medical, Pharmacy, Doctor, Lab, Grocery Store, Social Activity, Exercise Class/Gym, Appointments, Salon, BART, Car Repair)
- Technology**  
(Example: Tech Support [PC, MAC/Apple], Social Media, Cell Phone, Internet Information, Home Assistant [Alexa, Echo, Google Home] Set-Up, Clerical)
- Social & Cultural Programing**  
(Example: Offer Classes [foreign language, arts & crafts, etc.], Discussion Groups, Book Clubs, Research new Program and Activities, Organize and Staff Large Events, Conduct workshops for Clayton Valley Village Members [household financial management, wills and estate planning, end of life issues, advanced medical directives, palliative and hospice care, home safety, identify theft, exercise, nutrition, Medicare])
- Village Support** (Organization and Administrative Tasks for Clayton Valley Village)  
(Example: Processing forms and papers, Filing, Data Entry, Assisting with Newsletter, Special Projects, Event Set Up, Contacting Members and Volunteers to Schedule Services)

**Additional Skills & Expertise** ( Ex: Teacher, Accountant, nurse)

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I am physically and mentally able to perform each of the volunteer opportunities I have checked above. I understand the completion of this application does not obligate Clayton Valley Village to offer me a volunteer position. In processing my volunteer application, I acknowledge that my listed references and former volunteer sites may be verified. A thorough background check will be conducted at my expense by *Verified Volunteers, a SterlingBackcheck Company*. I hereby grant permission to any school, person, firm or corporation to give Clayton Valley Village any relevant information that may be required to arrive at a decision on the status of this application. I release Clayton Valley Village, its officers, employees, representatives, and agents, from any and all liability and/or damages incurred by me in accessing or using such information.

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Signature

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Date

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Print name

Thank you for applying to the Clayton Valley Village volunteer program! Please submit your application to:

**Clayton Valley Village** P.O. Box 1274, Clayton, CA 94517 [www.claytonvalleyvillage.org](http://www.claytonvalleyvillage.org) 925 626-0411