



**AmeriCorps
Seniors**

Retired Senior Volunteer Program-RSVP of Rock County

AMERICORPS SENIORS VOLUNTEER ENROLLMENT FORM

FOR OFFICE USE ONLY!

Station(s) _____

Assignment(s) _____

Date Assigned: ____/____/____

Computer Entry: ____/____/____

By: _____

Please print and complete all sections. Forms with original signatures are required for enrollment.

Name _____ Birth Date _____ Age _____

Mailing Address _____ City _____ Zip _____

Phone _____ Cell Phone _____ Email _____

Are you a Veteran? ____ Yes ____ No Physical/Medical Limitations: _____

Have you ever been convicted of a criminal offense or misdemeanor? Yes No

If Yes, please attach an explanation of charges, date of offense, and status of the charges on a separate sheet to be included with this application.

Driver's License # _____ State _____ Expiration Date _____

AmeriCorps Seniors RSVP provides a mileage reimbursement for travel between home and volunteer site to the volunteers.

Will you be claiming a mileage reimbursement for travel to and from your volunteer location? Yes ____ No ____

If Yes, is a copy of your proof of auto insurance showing active coverage attached? Yes ____ No ____

As an AmeriCorps Seniors volunteer in RSVP, you will be covered by accident, personal liability, and excess automobile insurance plus a small death benefit while performing volunteer duties. This coverage is automatic and free of cost to you as long as you are an active, enrolled as an AmeriCorps Seniors volunteer in RSVP. Please provide the following information.

Emergency Contact _____ **Phone** _____

Beneficiary for AmeriCorps Seniors RSVP Supplemental Accident Insurance:

Name _____ Relationship _____

Address _____ Phone _____

Employment Experience _____ Volunteer Experience _____

Special Skills/Interests/Languages _____

Days/Hours Available: Mon ____ Tues ____ Wed ____ Thu ____ Fri ____ Mornings ____ Afternoons ____

Please indicate if AmeriCorps Seniors RSVP may have permission to use your likeness?

[] I hereby grant RSVP of Rock County permission to use my likeness in photograph(s)/video(s) in any and all of its publications or on the world wide web, whether now known or hereafter existing, controlled by AmeriCorps Seniors RSVP of Rock County in perpetuity. I will make no monetary or other claim against AmeriCorps Seniors RSVP of Rock County for the use of these photograph(s)/video(s).

[] I do not give permission to use my likeness in photograph(s)/video(s) to RSVP of Rock County.

Certifications:

By signing below, I acknowledge that I have read, agree and understand the following statements:

- I hereby state that I am 55 years of age or older and offer my services as a volunteer for the Retired Senior Volunteer Program (RSVP) of Rock County. I understand that I am not an employee of the AmeriCorps Seniors RSVP Project, RSVP of Rock County, the volunteer station or the Federal Government and agree to serve without compensation.
- I understand that in my capacity as an AmeriCorps Seniors volunteers in RSVP I may come into contact with confidential information. I agree to protect this information to the best of my ability and not to disclose it during or after my service as a volunteer has ended.
- I understand that that as an AmeriCorps Seniors volunteer, I will not conduct or engage in any prohibited activities including religious, sectarian or political activities.
- I understand that all AmeriCorps Senior Volunteer Stations will be accessible to persons with disabilities (including mobility, hearing, vision, mental, and cognitive impairments or addictions and diseases) and /or limited English language proficiency and provide reasonable accommodation to allow persons with disabilities to participate in programs and activities.
- I understand that all AmeriCorps Senior Stations and volunteers will not discriminate on the basis of race, color, national origin, sex, age, religion, sexual orientation, disability, political affiliation, marital or parental status, pregnancy, reprisal, genetic information or military service.
- I understand that if I use my personal automobile in my volunteer service, I will arrange to keep in effect automobile liability insurance equal or greater to the minimum requirements of the state of Wisconsin. I will also keep in effect a valid Wisconsin/Illinois Driver's license.
- I understand that RSVP of Rock County has a policy to both encourage and protect persons known or anonymous who may come forth with complaints regarding grievances they may have about issues of employment, volunteering, volunteer operations, and/or services of RSVP of Rock County. Initial grievances must be reported, in writing, to RSVP of Rock County staff within 15 days of the incident.
- RSVP of Rock County is an equal opportunity Agency. Enrollment is done without regard to race, color, national origin, sex, age, religion, sexual orientation, disability, political affiliation, marital or parental status, pregnancy, reprisal, genetic information or military service. AmeriCorps RSVP provides reasonable accommodations to the known disabilities of individuals in compliance with the Americans with Disabilities Act. For accommodation information or if you need special accommodations to complete the application process, please contact RSVP of Rock County at (608) 362-9593. I understand that if I believe that I or others have been discriminated against, or if I want to seek advice, I can contact the Equal Opportunity Office (EEOP) AmeriCorps at 250 E. Street, SW Washington, DC 20525 at (202) 606-3461 or eo@americorps.gov.
- I understand and agree that I have received access to and will follow RSVP of Rock County's policies including Grievance, Non-discrimination, Accessibility, Confidentiality, National Service Criminal History Check, and Prohibited Activities.

AmeriCorps/RSVP Seniors Volunteer Signature Date

Staff Signature Date

The following information is optional and will not affect your enrollment with RSVP of Rock County:

1. Occasionally RSVP of Rock County will purchase volunteer recognition gifts for AmeriCorps Seniors volunteers. Please share the size you would use on each item below. (not guaranteed to receive)

Item	Size	Item	Size	Item	Size
Jacket		Vest		Hoodie	
Sweatshirt		Hat		T-shirt	

2. Which show of appreciation would mean the most to you? (check multiple, not guaranteed to receive)

Food/Meals <input type="checkbox"/>	Gifts <input type="checkbox"/>	Certificates <input type="checkbox"/>
Logo wear <input type="checkbox"/>	Being chosen as the volunteer of the year <input type="checkbox"/>	Recognized in media/ newsletter <input type="checkbox"/>

3. AmeriCorps Seniors RSVP is often asked to provide demographic & other information pertaining to volunteers. Please provide the following information (Optional).

Annual Household Income _____

Are you an active Military Member? _____ Are any of your family members actively serving in the military? _____

Are you a caregiver receiving respite care? _____ Do you identify as a member of the Disability community? _____

Housing owned by you or someone in your household with a mortgage or loan _____ Owned without mortgage/loan _____

Housing is rented with payment/rent _____ Rented without payment _____ Receiving Independent Living Services _____

Sex:

___ Male

___ Female

___ Prefer not to answer

Race:

___ White ___ Asian ___ Black/African-American ___ Two/More Races ___ Other

___ American Indian/Alaska Native ___ Pacific Islander ___ Prefer not to answer

Ethnicity: ___ Hispanic/Latino ___ Non-Hispanic/Latino ___ Prefer not to answer

Return completed registration to:
(Original Signatures Required)

RSVP of Rock County Inc.
1201 Big Hill Ct. #2
Beloit, WI 53511

For Questions contact:

608-362-9593

Angela Crawford

Program Coordinator

acrawford@rsvp-rock.org

Patty Hansberry

SVS Program Director

phansberry@rsvp-rock.org

AmeriCorps/RSVP Seniors Volunteer Signature

Date

RSVP of Rock County Staff Signature

Date

Volunteering Preferences:

1. Preferences by area, please circle all the locations in which you can volunteer: (specifically for the SVS driving program- what communities are you willing to pick up and drop off riders)?

- Beloit, Janesville, Madison, Edgerton, Milton, Evansville, Orfordville, Clinton, South Beloit, Roscoe, Rockton, Milwaukee, Chicago, etc.
- ANY (I have no preference and am willing to drive to any of the communities listed).

2. Preferred communication method: (circle all that apply)

- Text, email, mail, phone

3. Areas of interest: (circle all that apply)

Seniors Volunteering for Seniors (SVS)

- Driving older adults to medical and health-related appointments.
- Driving older adults to the grocery store.
- Driving older adults to the bank.
- Delivering Food Pantry packages to homebound or disabled older adults.
- Visiting older adults in their home for Friendly Visits.
- Providing Phone Calls to older adults for socialization.
- Yard work such as lawn mowing, tree trimming, weed removal etc. for older adults.
- Handyperson in-home projects such as minor home repairs to support older adults.

Intergenerational

- Reading to elementary students.
- Mentoring & tutoring to elementary students (reading and math).
- Mentoring & tutoring young people after school at the Boys & Girls Club.
- Performing a puppet show to elementary students about peer pressure, bullying, self-image and addiction.

Other

- Knitting, crocheting, sewing or quilting blankets, hats, scarves, gloves, socks, etc. for people in need.
- Serving as a board member or committee member (policy, governance, etc).
- Working an information booth for RSVP at community events such as resource fairs, farmers markets, etc.
- Sorting & organizing donations.
- Clerical/administrative duties, such as stuffing & addressing envelopes, updating letterhead etc.
- Answering & making phone calls, welcoming/greeting consumers in person.
- Office organization, organizing records/files, storage etc.
- Computer data entry, record upkeep.
- Marketing, advertising, social media, website development/creation.
- Fundraising and event planning.

Community Based Programs

If interested in volunteering at other local partner agencies (circle all of interest)

- ☐ Senior Centers
- ☐ Meals on Wheels
- ☐ Food Pantries
- ☐ Hospitals, clinics, etc.
- ☐ Historical Society
- ☐ Homelessness Service Providers
- ☐ Domestic Violence Service Providers
- ☐ Women, Infant & Children (WIC) Services
- ☐ Boys & Girls Clubs
- ☐ Elementary Schools
- ☐ Faith Based organizations
- ☐ Clothing/Personal Essential Pantry
- ☐ Colleges/Other School Programs: _____
- ☐ Other: _____