

Junior Volunteer Duties and Responsibilities

One to one visit with Neighbors: Reading, puzzles, conversing, reminisce, etc.

Facility help: Passing ice water, gardening, folding laundry, dietary set up, etc.

Assist with daily activities: Games, Sing-a-longs, Bingo, Special entertainment, Socials, Crafts etc.

Outings: Fishing, bus rides, Home and Garden show, Fair, Rodeo, Sporting events, Concerts, Shopping etc.

Outside Activities: Gardening, Bird feeding, Wheelchair rides, Picnics

Special Events: Hawaiian Luau, Neighborhood picnics, Fair, Swimming Party, End of year party for Jr. Volunteers

Please remember that you are here to make life more fulfilling for our Neighbors. We hope you will be their friends and do things to make their lives more enjoyable and fun while you are here.

Shaire Chavez
Eben Ezer Lutheran Care Center
Volunteer Coordinator
970-842-2861 ext. 9246
schavez@ebenezer.org
Volunteer@ebenezer-cares.org



Rules for Junior Volunteers

You are responsible for your own transportation. Arrive to work **no more than 5 minutes** before your check-in time. Leave the grounds when your work time is over. (Make sure you are picked up within 10 minutes of the end of your work).

If you can't come in when you are scheduled, please call 842-2861 ext. 9246. Please state your name, your scheduled time and why you are unable to work. Please do not come in sick. If you have vomited, had diarrhea, a sore throat or a fever in the previous 24 hours please stay home.

Your immediate supervisor is the Community Outreach/Volunteer Coordinator Shaire Chavez. Please check in with your supervisor when you arrive each day and you will sign in every time you are here to volunteer. After checking in you will assist your Life Enrichment Coordinator out on the neighborhoods.

Safety and Security: We need to maintain safety at all times for volunteers, neighbors and staff. **ONLY** staff is authorized to assist neighbors in transferring or moving in their chairs in any way. Volunteers must never attempt to transfer or lift neighbors. Please report any neighbor's needs to nursing staff or activity staff.

Dress Code: Shorts may be worn but must be no more than 2-4 inches above the knee. Sandals or shoes with high heels or soles that will slip or mark the floor are not permitted. **Tennis shoes are recommended. Please wear your volunteer t-shirt and name tag at all times when on duty.** No artificial nails. (Too good of place for germs to hide)

Please do not bring anyone who is not a Jr. Volunteer to work with you.

While on Eben Ezer campus, **please do not run, talk – don't yell**, do not chew gum, and treat everyone with respect.

Knock before entering any room, when recognized; say your name and what you are there for. Respect the belongings of others. Please do not move or rearrange any items in neighbor's rooms. If a neighbor asks for assistance, please tell a staff person.

Gifts- Do not give "gifts" to neighbors or accept gifts of any kind.

Smoking, use of alcohol and illegal drugs, stealing or destruction of property are all causes for immediate dismissal and can be punishable by law.

Bullying-Teasing, Bullying can be lots of things, including hitting, pushing, name calling, threatening, teasing and lots of other nasty stuff that's done on purpose to hurt someone. Bullying is not acceptable in our facility.

Junior Volunteer Application

Please Print:

Name _____ Date _____

Address: _____ Phone Number: _____

Parent Email Address: _____

Birth Date: _____ School Grade: _____

Physical Limitations: (if any) _____

Overall health conditions: _____

In case of emergency, notify _____ Phone Number _____

Relationship to applicant _____

Please list two adult references (not related to you) along with their phone numbers:

1. Name _____ Phone Number _____

2. Name _____ Phone Number _____

Past Volunteer experience _____

Special Skills or hobbies _____

Community affiliations (clubs, church, etc.) _____

Language other then English spoken _____

T-shirt size (adult size) _____

Applicant's signature _____

By signing this application, the parent or guardian gives permission for the applicant to participate in the junior volunteer program.

I give Eben Ezer Lutheran Care Center permission to obtain emergency medical care including calling and ambulance if necessary.

Child name _____

Parent's Signature _____ Date _____

Junior Volunteer Photo Permission

I _____, hereby grant my permission to appearing in Eben Ezer Lutheran Care Center's Phoebe newsletter and other promotional materials.

This gives Eben Ezer Lutheran Care Center the right to use any pictures or videos of my likeness in their promotional materials. I will request no monetary or any other type of compensation for my appearance.

Jr. Volunteer Signature _____ Date _____

Parent Signature _____ Date _____

Junior Volunteer Outing Permission

I give my permission for (print child's name) _____ to attend outings off the Eben Ezer campus as part of the Jr. Volunteer Program.

Parent Signature _____

Parent Name (please print) _____

Parent Phone Number _____ Date _____

Confidential Information

We at Eben Ezer Lutheran Care Center have an obligation to our neighbors' to maintain their confidentiality and respect their privacy. You must not share confidential information or happenings with anyone. Information is not to be shared with family, friends, or acquaintances. **Volunteers are not permitted to remove or make copies of Eben Ezer Lutheran Care Center's reports or records.**

Release of confidential information to unauthorized person can result in dismissal from service and could involve you in legal proceedings.

I hereby agree that all information received in the performance of my volunteer work for Eben Ezer Lutheran Care Center is confidential and I understand my responsibility.

Volunteer Signature _____ Date _____

Parent Signature _____ Date _____

Violating any of these rules may be grounds for immediate dismissal

I _____ understand and commit to the rules outlined in this policy of the Eben Ezer Lutheran Care Center Jr. Volunteer program.

Date _____ Signature _____

Parental Permission

I _____ parent of _____ commit to supporting the rules of the

Date: _____ Signature: _____

Eben Ezer Community Outreach/Volunteer Coordinator

Date: _____ Signature: _____