

Office Use Only: Placement: _____ Referral: _____ Date: _____



Volunteer Connect 55+ Registration

Directions: Please complete both sides of this form, and see bottom of pg. 2 for submission instructions.

Today's Date: _____

VC55+ Mission: To foster a meaningful, peer-to-peer older adult volunteer program in Orange County based on each participant's skills, passions, and talents in order to promote healthy aging, sense of purpose, and high quality of life for all of Orange County's older adults.

Contact Information

Name (Print) / DOB	Last:	First:	Date of Birth:		
Address	City:		St:	Zip:	County:
Phone / Email	Home:	Cell:	Email:		
Preferred contact method?	<input type="checkbox"/> Home Phone <input type="checkbox"/> Cell <input type="checkbox"/> Email				

Demographic Information for Funding (optional)

We ask the following information so that we can provide accurate data about our volunteer pool to our funders. All personal information is kept private and confidential and will not be used to discriminate against anyone. VC55+ does not discriminate against anyone on the basis of race, religion, gender, age, national origin, sexual orientation, or disability.

Birth Date: _____ Military Vet: Yes No

Gender: Male Female

Ethnicity: Hispanic Non-Hispanic

Choose the one Race category that most closely represents your background:

- American Indian or Alaska Native, Asian Black or African American
 Native Hawaiian or Other Pacific Islander White Other

Emergency Contact & Special Considerations

Name	
Phone	
Relationship	

Do you have any physical condition to consider in arranging your volunteer assignment? Yes No

If yes, what do we need to consider? _____

Availability

When are you available to volunteer? Mornings Afternoons Evenings Weekdays Weekends

How many months do you anticipate volunteering? _____

How will you travel to your volunteer location? My Car Bus Other Transportation _____

How Did You Hear About Us?

- Another volunteer Hands on Triangle website or referral Senior Center
 Senior Times Newspaper Staff Member: _____ Department on Aging Website
 Word of Mouth Other _____ Department on Aging Listserv
(over)

Special Skills, Training, Passions, and Interests

Summarize the **special skills and qualifications you have acquired** from employment, previous volunteer work, or through other activities, including hobbies. Please **emphasize the type of work you enjoy most and any skills you would like to gain** through your volunteer experience with VC55+.

Volunteer Opportunity Selection

____ I'd like to **review the various available opportunities** with VC55+ staff, and would like the VC55+ staff to recommend positions that would best fit my interests and skillset, or the positions that are in the most need of current volunteers.

and/or

____ I know where I'd like to **volunteer** (see page three of this application for a listing of opportunities). Please list the **positions you are interested in:**

Agreement and Signature

By signing below, I affirm that the facts set forth here are true and complete. I consent to a background check if required for my position at anytime during my volunteer service (separate form required).

Name (printed) / Date	
Signature	

To submit your application, please email or fax it, or drop it off at either Senior Center:

Judy Mathias, Volunteer Coordinator:

Email: jmathias@orangecountync.gov

Phone: (919) 245-4243

Fax: (919) 968-2093

**Seymour Center
2551 Homestead Road
Chapel Hill, NC 27516**

**Central Orange Senior Center
103 Meadowlands Drive
Hillsborough, NC 27278**

Web: www.orangecountync.gov/aging/volunteerconnect55

List of Volunteer Opportunities

Please see Volunteer Handbook for detailed descriptions.

Senior Center-Based Opportunities

Senior Center Support Programs

- Front Desk Team
- Gardening/ Flower Arrangement Team
- Nutrition (Lunch Food Service) Team
- Special Events & Projects

Wellness Programs

- Blood Pressure Screening Team (LPN or RN)
- Clerical Team
- Exercise/ Health Instructor Team
- Memory Screening Team
- Music & Memory Team
- Senior Games Team
- Special Events/Projects

Chinese Connections (Seymour Center)

- Chinese Ambassador Program (general volunteering)
- Chinese ESL & Conversation Lab
- Chinese Hospitality
- Chinese Peer to Peer Support Program

The Arts & Entertainment

- Jammers
- Media- Film, Photos, Video
- Musicians
- Quilting
- Prime Time Players
- Retro's Group
- Special Events/Projects
- TYS- Teach Your Specialty
- Tappers
- Village Revue

Tax Assistance

- VC55+ VITA
Volunteer Income Tax Assistance Program
(Administrative Assistants, Appointment Schedulers, Computer Specialist, Instructors, Site Coordinators, Site Receptionists, & Tax Preparers)

Community-Based Opportunities

Aging Well Supports

- Volunteer Drivers Program
- Friend To Friend Team
- Phone Reassurance Team
- SHIIP:
Senior Health Insurance Information Program
(Medicare & Affordable Care Insurance Assistance & Education)
- Caregivers Day Out Team
- Caregiver Mentor Team
- Handy Helpers Team
- Senior Times Delivery Team

Project EngAGE Community Resource Teams

- Community Visitors/SALT Team
- Faith-Based Outreach Team
- Senior Falls Prevention & Health Promotion Team
- End of Life Choices Team
- Senior Rural Hunger Team
- Senior Transportation & Mobility Team
- Neighborhood Connections Team

Boards & Committees

- Friend of the Senior Centers
- Program Advisory Teams
- Adult Home Care Community Advisory Committee
- Nursing Home Community Advisory Committee

Volunteer Connect 55+ Program Team

- VC55+ Clerical Specialist
- VC55+ Intake Specialist
- VC55+ Volunteer Recognition Specialist

How to Record Volunteer Hours?

See your contact person for the appropriate method to report your volunteer hours (either via a Site Form or by using the Lobby Book).