**WRC Senior Services** 985 Route 28, Brookville, PA 15825 Phone: 814-849-1205

**VOLUNTEER APPLICATION**

**WRC Communities: (Please check where you are applying)**

ڤ McKinley Health Center (skilled nursing), Brookville

ڤ Laurelbrooke (personal care), Brookville

ڤ Edgewood Heights (personal care), New Bethlehem

ڤ Highland Oaks (personal care), Shippenville

ڤ Ridgmont (personal care), Ridgway

ڤ North Fork Heights (independent living), Brookville

ڤ In-Home Solutions/In-Home Solutions Plus (home care), Five-County Area

ڤ WRC Parent Office

Name

Last First Middle

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Street City State Zip

Home Phone (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_ Work/Cell Phone (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_ SSN \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you lived outside of Pennsylvania at any time during the past two years? ڤ Yes ڤ No

Reason for Volunteering: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interested volunteer service area(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current and Previous Volunteer Experience**

Family Information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Education: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Present/Pursued Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Previous Experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Skills/Hobbies and Interests: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Community/Club Affiliations’: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

When are you available to volunteer? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_AM \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ PM

Mon\_\_\_\_\_ Tues\_\_\_\_\_ Wed \_\_\_\_\_ Thur \_\_\_\_\_ Fri \_\_\_\_\_Sat \_\_\_\_\_ Sun\_\_\_\_\_

Source of Transportation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Personal References**

Name Telephone Relationship How long known

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Person to notify in case of an emergency**

Name Telephone Relationship

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**AN EQUAL OPPORTUNITY EMPLOYER**

**WRC Senior Services and its affiliates consider applicants for all positions without regard to race, color, religion,**

**age, creed, gender, national origin, disability, marital or veteran status or any other legal protection status.**

**Re: PER 20 Background Investigations**

Pennsylvania law, in accordance with the Older Adults Protective Services Act, requires WRC Senior Services to obtain a background criminal history check from the PA State Police; and, also the FBI if you have lived out of state within the last two years. Any offer of volunteerism is contingent upon the receipt of a satisfactory check.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, understand that my continued volunteerism with any WRC Senior Services community is contingent upon the satisfactory outcome of my criminal history check, as stated above.

I, , attest that I have read the following list of Prohibitive Offenses and have no history of conviction for any of the listed offenses and have never been dismissed from employment/ volunteerism due to abuse of clients or residents.

I, , attest that I have not been dismissed or terminated from previous employment/ volunteerism due to an alleged allegation of abuse against an older adult and have no history of conviction for abuse of the older adult clients or residents.

The offenses that make a person ineligible for employment/ volunteerism are as follows:

|  |  |  |
| --- | --- | --- |
| **Offense Code** | **Prohibitive Offense** | **Type of Conviction** |
| CC2500 | Criminal Homicide | Any |
| CC2502A | Murder I | Any |
| CC2502B | Murder II | Any |
| CC2502C | Murder III | Any |
| CC2503 | Voluntary Manslaughter | Any |
| CC2504 | Involuntary Manslaughter | Any |
| CC2505 | Causing or Aiding Suicide | Any |
| CC2506 | Drug Delivery Resulting in Death | Any |
| CC2702 | Aggravated Assault | Any |
| CC2901 | Kidnapping | Any |
| CC2902 | Unlawful Restraint | Any |
| CC3121 | Rape | Any |
| CC3122.1 | Statutory Sexual Assault | Any |
| CC3123 | Involuntary Deviate Sexual Intercourse | Any |
| CC3124.1 | Sexual Assault | Any |
| CC3125 | Aggravated Indecent Assault | Any |
| CC3126 | Indecent Assault | Any |
| CC3127 | Indecent Exposure | Any |
| CC3301 | Arson and Related Offenses | Any |
| CC3502 | Burglary | Any |
| CC3701 | Robbery | Any |
| CC3901 | Theft | 1 Felony or 2 Misdemeanors |
| CC3921 | Theft By Unlawful Taking | 1 Felony or 2 Misdemeanors |
| CC3922 | Theft By Deception | 1 Felony or 2 Misdemeanors |
| CC3923 | Theft By Extortion | 1 Felony or 2 Misdemeanors |
| CC3924 | Theft By Property Lost | 1 Felony or 2 Misdemeanors |
| CC3925 | Receiving Stolen Property | 1 Felony or 2 Misdemeanors |

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| --- | --- | --- |
| **Offense Code** | **Prohibitive Offense** | **Type of Conviction** |
| CC3926 | Theft of Services | 1 Felony or 2 Misdemeanors |
| CC3927 | Theft By Failure to Deposit | 1 Felony or 2 Misdemeanors |
| CC3928 | Unauthorized Use of a Motor Vehicle | 1 Felony or 2 Misdemeanors |
| CC3929 | Retail Theft | 1 Felony or 2 Misdemeanors |
| CC3929.1 | Library Theft | 1 Felony or 2 Misdemeanors |
| CC3930 | Theft of Trade Secrets | 1 Felony or 2 Misdemeanors |
| CC3931 | Theft of Unpublished Dramas or Musicals | 1 Felony or 2 Misdemeanors |
| CC3932 | Theft of Leased Properties | 1 Felony or 2 Misdemeanors |
| CC3933 | Unlawful Use of a Computer | 1 Felony or 2 Misdemeanors |
| CC3934 | Theft from a motor vehicle | 1 Felony or 2 Misdemeanors |
| CC4101 | Forgery | Any |
| CC4114 | Securing Execution of Documents by Deception | Any |
| CC4302 | Incest | Any |
| CC4303 | Concealing Death of a Child | Any |
| CC4304 | Endangering Welfare of a Child | Any |
| CC4305 | Dealing in Infant Children | Any |
| CC4952 | Intimidation of Witnesses or Victims | Any |
| CC4953 | Retaliation Against Witness or Victim | Any |
| CC5902B | Promoting Prostitution | Felony |
| CC5903C | Obscene or Other Sexual Materials to Minors | Any |
| CC5903D | Obscene or Other Sexual Materials | Any |
| CC6301 | Corruption of Minors | Any |
| CC6312 | Sexual Abuse of Children | Any |
| CS13A12 | Acquisition of Controlled Substance by Fraud | Felony |
| CS13A14 | Delivery by Practitioner | Felony |
| CS13A30 | Possession with Intent to Deliver | Felony |
| CS13A35 (i), (ii), (iii) | Illegal Sale of Non-Controlled Substance | Felony |
| CS13A36 | Designer Drugs | Felony |
| CS13Axx | Any Other Felony Drug Conviction  Appearing on a PA Rap Sheet | Felony |

Please Note: Offenses occurring within the 3900 series require one felony in any of the listed offenses, or a combination of any two misdemeanors in any of the listed offenses.

I give my permission for WRC and its affiliates to investigate all references and other information provided, and to secure additional information about me, if volunteer related, including information from licensure or certification agencies. I hereby release from liability WRC and its representatives for seeking such information and all other persons, corporations or organizations for furnishing such information.

I understand that, as a condition of volunteerism with WRC Senior Services or any affiliate or entity thereof, a criminal history background clearance must be obtained from the Pennsylvania State Police and/or the Federal Bureau of Investigation, that Pennsylvania law prohibits organizations caring for the elderly from having persons convicted of certain crimes, and that this information must be requested immediately upon volunteering.

I understand that if I complete volunteer duties within WRC and/or its affiliates my volunteerism may be terminated at any time, with or without cause, by WRC, its affiliates or me.

It is understood and agreed that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or separation from the employer’s service if I have been employed.

Signature of Volunteer Date

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Maiden Name or Alias(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Interviewed and Approved by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Starting Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_