



CITY OF CHINO HILLS SAVVY

Seniors Assisted by Visiting Volunteers and Youth

14000 City Center Drive, Chino Hills, California 91709-4869
(909) 364-2730 ♦ (909) 364-2725 Fax



Volunteer Application

Thank you for your interest in the SAVVY Program. Knowing your interests, skills, and available hours will help us find the best assignment for you. Please fill out this form as completely as possible.

Name _____
Last, First Middle

Address _____
Street City Zip Code

Telephone () _____ () _____
Home Work

Drivers License Number _____ Auto Insurance _____

Current Position (employed, retired, student, homemaker, etc.) _____

Previous work experience _____

Previous volunteer work _____

How did you hear about the SAVVY Program? _____

Please check the area(s) you would be interested in volunteering:

- Child Care
- Housecleaning
- Personal Patient Care
- Other: _____
- Yard Work
- Meal Preparation
- Bereavement
- _____
- Counseling
- Shopping/Errands
- Instruction
- _____

Please list any skills you have which you think can be used in this program. _____

What are your interests and hobbies? _____

What is your religion? (Optional, this may be important to some of the seniors) _____

Please check and fill-in the day(s) and times you are available

- Sunday, from _____ to _____
 - Monday, from _____ to _____
 - Tuesday, from _____ to _____
 - Wednesday, from _____ to _____
 - Thursday, from _____ to _____
 - Friday, from _____ to _____
 - Saturday, from _____ to _____
- Total hours available each week:** _____

Emergency Contact Name _____ Phone _____

Signature of Volunteer Applicant _____ Date _____

Signature of Parent if Applicant is under 18 years of age _____ Date _____

