



3746 St. Paul Blvd
Rochester, NY 14617
(585) 467-3524

Volunteer Application

Date: _____

Name: _____ Phone (home) _____ (cell) _____

Address: _____ Zip _____

Email: _____

Birth date (year optional): _____

Are you presently working outside the home? Yes No

Are you working, or have you worked in a caregiver capacity? Yes No

If yes, please describe: _____

What experience have you had with death or loss? _____

Have you done volunteer work in the past? Yes No

If yes, please explain where, what type of work: _____

Can we answer any questions you have concerning hospice care? _____

Please check your volunteer interests that can be used at Sunset House:

Physical care of resident(s) General household maintenance Cooking Cleaning

Laundry Fundraising Outdoor work (lawn care, gardening, etc.)

Other _____

Please check when you would be available:

7 am – 11 am ____ 11 am – 3 pm ____ 3 pm – 7 pm ____ 7 pm – 11 pm ____

SUN ____ MON ____ TUES ____ WED ____ THURS ____ FRI ____ SAT ____

Indicate your preference: _____

Your emergency contact phone number: (home) _____ (cell) _____

Relationship _____

If you are interested in volunteering, please call (585) 467-3524 to set up an interview. Feel free to print this application, fill it out and bring it with you to the interview.

Thank you in advance for your interest in volunteering your time.

OFFICE USE ONLY _____

Interviewer: _____ Date: _____