



136 W. Peoria Street • Pasadena, CA 91103  
phone: (626)795-5166 • fax: (626)795-8154

# Volunteer Involvement Form for Community Volunteers

Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
First Middle Last

Today's Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_      Birthday:(Month/Day): \_\_\_\_\_ / \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: H(\_\_\_\_\_) \_\_\_\_\_ W(\_\_\_\_\_) \_\_\_\_\_ C(\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

How did you hear about Young & Healthy? \_\_\_\_\_

Have you had chicken pox? yes no      Have you had a TB test in the last 60 days? yes no  
(proof of test required if working in school setting)

Have you had measles, mumps or rubella? yes no      If no, have you been immunized? yes no

### Emergency Contact Information

Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

Name of your doctor: \_\_\_\_\_ Phone: (\_\_\_\_\_) \_\_\_\_\_

In case of emergency, is there anything we need to know (e.g. diabetic, etc.)? \_\_\_\_\_

The following information is only for the purpose of statistical records and in no way influences your opportunity to work in the program. It will be kept confidential and will aid us in future volunteer recruitment.

Gender:  Male  Female      Occupation or previous occupation: \_\_\_\_\_

Ethnic background: \_\_\_\_\_ Educational background: \_\_\_\_\_

Age: under 18 18-30 31-40 41-50 51-60 61-70 71-80 80 & over

**Continued on reverse side →**

What kind of experience have you had working with children? \_\_\_\_\_

Do you have previous experience working in health care? If so, what type of experience? \_\_\_\_\_

Do you have any skills that you feel could be useful to Young & Healthy? \_\_\_\_\_

What interests you about volunteering for Young & Healthy? \_\_\_\_\_

Do you speak a second language and, if so, which language(s)? \_\_\_\_\_

### Volunteer Assignment Preference

**Young & Healthy Office:**

Help with clerical tasks and projects as needed.

**Special Events:**

Work at Y&H events, health fairs & community events such as USC Mobile dental clinic, dental screening days, etc.

**First Grade Dental Education Program:**

Receive training and supplies to make 30-minute presentations once a month (Oct-May) to a first grade class about oral health.

**Translation.**

Language: \_\_\_\_\_

Provide translation for families at their children's appointments, as needed.

**Transportation:**

Provide transportation for children and families to their children's doctor appointments, as needed.

**Other:** \_\_\_\_\_

### STATEMENT OF CONFIDENTIALITY

Respecting the privacy of our clients, donors, staff, and volunteers is a basic value of Young & Healthy. Personal, medical, and financial information is confidential and should not be disclosed or discussed with anyone except as necessary and approved in the performance of your duties for Young & Healthy. Staff, board members, and volunteers should take care to protect the contents of documents containing confidential information, and should refrain from discussing such information where it can be overheard by unauthorized individuals. Unauthorized disclosure of confidential information is a serious violation of this policy and will subject the person(s) who made the unauthorized disclosure to appropriate discipline, including dismissal from employment or further volunteer duties.

I have read this Statement of Confidentiality. I agree to abide by the requirements of this policy and to inform my supervisor immediately if I believe any violation of the policy has occurred, by me or someone else, whether or not intentional. I understand and acknowledge that the unauthorized release of confidential information could result in civil penalties, including fines, against me, Young & Healthy, and/or the Pasadena Unified School District, and could result in the termination of Young & Healthy programs by the Board of Education.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please mail, FAX or email this form to:  
Young & Healthy, 136 West Peoria Street, Pasadena, CA 91103, Fax: (626) 795-8154,  
email: [info@yhpasadena.org](mailto:info@yhpasadena.org)