

# Longmont United Hospital



**Volunteer Services**  
1950 Mountain View Ave  
Longmont, CO 80501  
(303) 651-5205  
Fax (303) 678-4851

## **Dear Prospective Junior Volunteer:**

Thank you for your interest in Longmont United Hospital's Junior Volunteer teen program. We are very proud of our volunteers and the roles they play as part of our healthcare team. Your willingness to share your time and talent makes a huge difference in the mission of the hospital.

In considering your wish to volunteer, it is very important to evaluate your schedule and the required time to successfully fulfill your volunteer commitment.

The Volunteer Services department is committed to providing equal opportunity for all applicants. Volunteer Services has the responsibility to recruit the most qualified volunteers, determine their capabilities and make assignments accordingly. The qualifications and requirements are as follows:

### Basic qualifications for all Junior Volunteers:

- Committed to volunteer once a week for the duration of the session: Fall, Spring and Summer sessions average 10-12 weeks in duration.
- At least 14 years of age and enrolled in High School.
- Honest, reliable and able to be professional in all interactions.
- Friendly and customer-service oriented.
- Physically able to work independently; some services require sitting, standing or walking for long periods of time.

### Requirements for volunteering (**Volunteer opportunities are not clinical internships or rotations**):

- Submit an application.
- Provide two (2) personal recommendation letters from an adult who is NOT related to you.
- Attend an interview with the Volunteer Manager to determine your interest, abilities, schedule and our openings and needs.
- Agree to a TB test and Influenza (flu) vaccination (at no cost to you).
- Attend and complete orientation prior to beginning your assignment.
- Attend on the job training specific to your volunteer position.
- Wear the volunteer uniform while volunteering

We are excited to meet you and discuss our volunteer program opportunities with you. If you have any questions, please contact the Volunteer Office at (303) 651-5205.

Thank you,

*Stacey Jackson*

Manager of Volunteer Services

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INSPIRE HEALTH

**Mission:** *We extend the healing ministry of Christ by caring for those who are ill and by nurturing the health of the people in our communities.*

**Vision:** *Centura Health will fulfill a covenant of caring for our communities with excellence and integrity to become their partner for life.*

**Core Values:** *Compassion, Respect, Integrity, Spirituality, Stewardship, Imagination, Excellence.*

June 2018

A decorative graphic in the bottom right corner consisting of several overlapping, semi-transparent lines in various colors (red, orange, yellow, green, blue, purple) radiating from a central point.

## Junior Volunteer Teen Application

High school students only

*Please print clearly or type • Complete all questions*

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Gender:  Male  Female Preferred Name (if different than first) \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Preferred phone number to contact me:  Home  Cell  I certify that I am at least 14 years of age

E-Mail Address: \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Month/Day (Year Optional)

First Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Second Emergency Contact Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Current High School Student?  Yes  No High School Attending: \_\_\_\_\_

Career Interests: \_\_\_\_\_ Anticipated Graduation Year: \_\_\_\_\_

Extra-curricular activities: (eg: Clubs, Sports, Youth Groups, part-time Job)

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

Please list any special skills, talents, hobbies or interests that may help place you for volunteer service:

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

Volunteer experience (past or current):  Hospital  Nursing Home  School  
 Faith Organization  Other: \_\_\_\_\_

Reasons why you would like to volunteer at Longmont United Hospital? \_\_\_\_\_

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

How did you hear about our program? \_\_\_\_\_

\_\_\_\_\_

**TIME AVAILABLE:** Please check the times you are usually available for a volunteer assignment

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning
<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon
<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening	<input type="checkbox"/> Evening

*Depending on placement, shifts are generally two (2) to four (4) hour shifts.*

**Please check which session you are interested in. There are deadlines and limited availability for each session:**

- Summer:** June through August
- Fall:** September through December
- Spring:** Late January through March

**VOLUNTEER INTERESTS:**

**Patient Contact Areas:**  Patient Ambassador (evenings)       Entertainment Cart (evenings)  
 Hospitality Cart (summer only – noon time)     Day Surgery (afternoons)

**Visitor & Information Areas:**  Welcome Desk (all shifts)     Birthplace Welcome Desk (evenings)

**Special Areas:**  Pharmacy (afternoon)       Music in the lobby or on patient floors (all)  
 Gift Shop (evenings & weekends)

***We attempt to place you in a volunteer service that will meet your interests and fit our availability. Times and services are subject to change.***

**Birthplace Welcome Desk:** Assist visitors with signing in to visit, help with daily badges; assist with security to the Birthplace Unit.

**Day Surgery:** Assist patients in preparation for surgery; working with staff to stock supplies and other duties as assigned.

**Entertainment Cart:** Offer a movie, DVD, book or magazine, and basic art supplies to patients. This position requires walking and pushing a cart throughout the hospital.

**Gift Shop:** Assist customers with purchases; stock merchandise; complete sales transactions on computer.

**Hospitality Cart:** Distribute nourishments to patients and families; work closely with Nutritional Services; requires walking and pushing a cart.

**Music Services:** Provide music in the main lobby or on patient floors, either on piano or with your own instrument.

**Patient Ambassador:** Assist with comfort needs of patients and families. Assist staff with admissions and discharges and other duties as assigned. Keep family rooms and kitchen in order and stocked.

**Pharmacy:** Assist Pharmacy staff; need to have attention to detail and be willing to stand for long period of times.

**Welcome Desk: This is a very important and rewarding service.** Responsible for greeting and escorting all visitors; act as LUH ambassador; answer a variety of questions about the hospital; delivery of flowers to patient rooms; requires walking long distances. Must have and demonstrate excellent customer service skills.

I certify that the information contained in this application is correct and complete to the best of my knowledge. Any misrepresentation of facts will be cause for rejection of this application.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Volunteer Agreement

We very much appreciate your being part of our volunteer team at Longmont United Hospital. We will make every effort to see that your experience here will be rewarding. To ensure that you realize the commitment involved, we request that you read the following statements and sign below:

### I understand that:

- Acceptance as a volunteer at Longmont United Hospital is contingent upon satisfactory completion of all pre-placement procedures which include, but are not limited to, an interview, completion of two recommendation letters, TB test results, Influenza vaccination, orientation and training.
- Volunteer Services within Longmont United Hospital are support systems for patients, visitors, staff and other volunteers.
- The Volunteer Services department is not obligated to utilize my services as a volunteer nor am I obligated to accept the assignment.
- My services are donated to the hospital without contemplation of compensation or future employment and given with humanitarian and charitable reasons.
- Volunteer opportunities are not clinical internships or rotations.

### Confidentiality:

I will hold as ***absolutely confidential*** all information that I may obtain directly or indirectly concerning patients, staff or personnel, and *not seek* to obtain confidential information from anyone that does not pertain to my volunteer position.

### Commitment:

- I will uphold the mission and vision of LUH at all times.
- I will be professional, punctual and conscientious, conduct myself with dignity, courtesy and consideration of others.
- I will make my best effort to fulfill my commitment to Longmont United Hospital by completing all assignments that I accept. I understand that Volunteer shifts, based on my availability, will be scheduled through the Volunteer Services Office. I will make every effort to try and find a substitute when unavailable for my volunteer shift. I will contact Volunteer Services in advance to notify them of any substitutions or absences.
- I will wear the required uniform and my badge while volunteering. I understand that while I am in uniform, I represent Longmont United Hospital.
- I have the right to request a new volunteer assignment if my current assignment is not acceptable to me.
- When I need to relinquish my volunteer assignment, I will give as much notice as possible (at least a two-week notice) and return my volunteer badge to Volunteer Services.

- The Volunteer Services department reserves the right to terminate my volunteer status as a result of:
  - Failure to comply with hospital policies, rules and regulations
  - Several absences without prior notification
  - Unsatisfactory attitude, work or appearance which interferes with our mission

**Health and Immunization:**

- As a Volunteer for Longmont United Hospital I understand I am not entitled to health benefits or other benefits that are extended to employees.
- If I am injured during the time that I am serving as a Volunteer I understand that I am covered by Centura’s insurance. I understand I need to report all injuries to Volunteer Services immediately.
- I understand that I must not lift patients or heavy equipment.
- I have been advised that there is an inherent risk of contracting a contagious illness when working in a healthcare facility. The hospital requires and provides for active volunteers, the Influenza vaccination annually and the Tuberculosis Quantiferon blood draw.
- I certify that I am responsible for discussing my volunteer service at the hospital and all recommended vaccinations with my personal physician/health care provider. Any other vaccinations are my responsibility to obtain at my personal cost.

**Drug-Free Workplace:**

In keeping with our mission and core values, Centura Health is dedicated to activities and services promoting health and wellness. Therefore, all volunteers must abide by applicable drug-related laws and must perform their responsibilities unencumbered by the improper possession, distribution, or use of drugs, narcotics, controlled substance or alcohol. The objective is to provide a safe, hazard free environment where patient care can take place under optimum conditions without exposing patients, associates, and others to unnecessary risk or harm. Your signature is your agreement with this policy.

**Tobacco Free Workplace:**

Individuals applying for a volunteer position at Longmont United Hospital (LUH) need to be aware that LUH is a tobacco-free facility. As such, smoking is prohibited in the hospital and anywhere on the hospital campus, including parking lots. For the safety and consideration of our patients, volunteers are expected to report to work free from the smell of smoke and remain smoke-free during their times of service. Your signature is your agreement with this policy.

\_\_\_\_\_  
Print Volunteer Name

\_\_\_\_\_  
Volunteer Signature

**Parent or Guardian:** I understand and support my child volunteering at Longmont United Hospital as a Junior Volunteer. I have read and understand the expectations of a Junior Volunteer. Should an emergency arise, I hereby authorize Longmont United Hospital to give medical care under the supervision of a licensed physician.

\_\_\_\_\_  
Parent or Guardian

\_\_\_\_\_  
Date

## Junior Volunteer Personal Recommendation

**Dear Teacher/Counselor:**

Each student who applies to volunteer at Longmont United Hospital must have a personal recommendation. We appreciate your evaluations and comments to help us choose candidates who will best benefit our Junior Volunteer program by contributing to the patients, families and staff at Longmont United Hospital. This information will be kept **confidential**. Please return the completed form **as soon as possible**. Thank you for your assistance.

---

**Student's Name** \_\_\_\_\_

Would the student's grades be adversely affected by a weekly commitment to Longmont United Hospital?

Yes  No

Volunteering within the hospital is a commitment and a considerable responsibility. Would this applicant fulfill these requirements and prove to be an asset to our team?

Yes  No

The following questions assist us in placement of volunteers in an area where their skills will most benefit our patients and staff. Please mark which most matches the applicant's qualities.

	Excellent	Good	Fair	Poor
<b>Communication</b> (Ability to work with others)				
<b>Work Ethics</b> (Ability to work hard, take pride in work)				
<b>Dependability</b> (Ability to commit, follow through on assignments, be punctual)				
<b>Directions</b> (Ability to follow oral and written instructions)				
<b>General Attitude</b> (Respect for others, positive outlook on life)				

Comments: \_\_\_\_\_

\_\_\_\_\_

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

**Title:** \_\_\_\_\_ **School:** \_\_\_\_\_

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Phone (303) 651-5205 • Fax (303) 678-4851  
[staceyjackson@centura.org](mailto:staceyjackson@centura.org)

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