



Auxiliary Volunteer Application

Name _____ Telephone _____

Address _____ City _____ Zip _____

Email Address _____

In case of emergency, contact _____ Relationship _____

Home Phone _____ Alternate _____

.....
Work/Volunteer Experience _____

Education/Special Training/Licenses _____

Foreign Language Skills _____ Hobbies _____

Have you ever been convicted of a crime? _____ If yes, please explain (when, where, and reason) _____

What appeals to you about volunteering at Woodland Healthcare? _____

Are there any activities or conditions that you must avoid? (If yes, please explain) _____

Availability:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							

Personal References:

Name	Address	Phone #	Relationship

Signature

Date

Mail completed application to:

Woodland Healthcare Administration
Jessica Blanco
1325 Cottonwood Street
Woodland, CA 95695

OFFICIAL USE ONLY

Application Accepted _____

Background Screening

Date _____

TB Test Complete

Date _____

Health Screening

Date _____

Orientation

Date _____

WHC Auxiliary Volunteer Services – **ADULT**

*Please indicate your 1st, 2nd and 3rd preference of assignments
by noting a 1, 2 or 3 by the position*

ADULT DAY HEALTH CENTER

Work Schedule: 10am – 2:30pm, Monday through Friday

Location: 20 N. Cottonwood St., Woodland, CA 95695 | Phone: 530.666.8828

Provides support to center staff who are engaged in a variety of activities that revolve around day health services. Volunteer activities can be tailored to meet the comfort level of the volunteer and may include group games, writing letters, assisting with meal service, walking or light conversation.

BLOOD DRIVE

Work Schedule: 6 Blood Drives per year – 2 hour shift on day of Blood Drive

Assists with registration at the drive, serve refreshments and greet and direct donors.

EMERGENCY/ICU DEPARTMENTS

Work Schedule: 2-4 hour shifts, 7 days a week

Assist patients and families/significant others: Phone calls, personal needs, meals, visiting. Simple transport: obtaining items from dietary and other departments, traffic control, stocking supplies and light cleaning. Put together blood bags and packets.

FAMILY BIRTH CENTER

Work Schedule: Tues and Thurs mornings, Weekends/Alternate hours flexible

Assist patients and families/significant others: phone calls, personal needs, traffic control and stocking supplies. Also assisting by assembling gift packs for new moms, preparing education packets, order all necessary forms for the department and help nurses with any necessary help.

GIFT SHOP

Work Schedule: 10am – 1:30pm or 1:30pm – 4pm, Monday through Friday

Evening and Weekend hours vary

The Woodland Healthcare Auxiliary Gift Shop is operated exclusively by Auxiliary volunteers who wait on customers and assist them with their selections. The Gift Shop is our most financially successful venture.

CANCER CENTER

Work Schedule: 11am – 1pm or 10:30am – 12:30pm, Monday through Friday (Afternoon shift, upon request)

Distribution of newspapers to patients, pick up meals from Hospital kitchen and pass the meals to patients, ensure blanket warmer is full at beginning and end of shift, visit with patient who would like to talk and restock supplies.

NO ONE DIES ALONE (NODA)

Work Schedule: as needed, on rotations of 2 hours a shift

A two-hour required training with the WMH Chaplain is a mandatory before beginning this work which is to sit with dying patients in their hospital rooms, reading to them, playing music softly on a provided CD Player, and /or talking to the patients, if applicable. Ensure all patient needs are taken care of.

SURGERY CENTER

Work Schedule: 7am – 10:30am or 10:30am – 2pm, Monday through Friday

Greets patients and provides direction and information as needed. Assists visitors who are waiting for a patient to be picked up after surgical procedures, maintains an orderly and organized waiting area, including preparation of coffee. Calls nurse in recovery room when driver is ready to pick up patient. Helps staff in performing assorted administration duties.

TUCK IN PROGRAM

Work Schedule: 7-9pm Monday through Sunday

Woodland Memorial Hospital 2nd and 3rd Floors (maybe reinstated)

Some of the duties you will assist with are:

- Pass out warm wash cloths, toothbrush, toothpaste, warm blanket, quiet kits
- Assist with nighttime hygiene - Denture cleaning assistance
- Pick up trays
- Refill water pitchers – Make sure to chart water fills
- Place disposable garbage bags on patient tray table
- Scan the patient's room/environment and tidy up as needed
- Offer magazines, books, stress relieving coloring books and pencils
- Make sure to ask before you leave if there is anything I can do for you before leaving
- Return cart at the end of shift and restock before leaving

JR. PROGRAM

Work Schedule: Flexible Hours

Woodland Memorial Hospital 2nd and 3rd Floors

Some of the duties you will assist with are:

- Provide support to departments listed

BEHAVIORAL HEALTH UNIT

Work Schedule: 10am – 2pm Monday through Friday

Woodland Memorial Hospital, 2nd Floor

Some of the duties you will assist with are:

- Volunteer will have the opportunity to work with a wide variety of people who are dealing with mental health issues
- Provide support to department staff
- Plan and execute a movement class
- Sing, play music or play musical instruments
- Yoga/Stretching for small groups
- Provide support for AA Group

PATIENT EXPERIENCE

PET THERAPY

Thank you for your interest
WOODLAND HEALTHCARE AUXILIARY

Welcome to Auxiliary Volunteer Services for Woodland Healthcare!

The first step to volunteering is to complete an application and receive a background screening clearance from Human Resources Department. You will be notified by email from Human Resources Department once cleared and receive information how to complete the next steps below:

It is our goal to provide a healthy work environment. It is therefore necessary for all new volunteers to complete a drug test and health screening to review your medical history and immunization status prior to beginning your volunteer service. It is recommended that you provide a copy of your childhood vaccination records showing proof of two MMR vaccinations and other vaccinations received.

HEALTH REQUIREMENTS:

1. Drug Test with Negative Result

2. Two Tuberculosis (TB) Screenings

Provide documentation of a TB Screening completed in the last year is recommended. If a TB Screening is not provided within the last year a two-step TB Screening (administered a minimum of 7 days apart) will be placed at Employee Health Services.

** If you are a positive reactor, we require proof of positive TB Screening with the induration listed in millimeters along with a chest x-ray completed within the last year.*

3. Immunity to Measles, Mumps and Rubella

Immune or be vaccinated

4. Status of Immunity to Hepatitis B and Varicella

Immune, be vaccinated or sign a declination

5. Tdap (Tetanus, Diphtheria and Pertussis) and Influenza vaccinated or sign a declination.

**If no vaccination or immunization records are provided you must have titers drawn to show immunity status for Measles, Mumps, Rubella, Hepatitis B and Varicella. A lab slip will be provided during your volunteer health clearance appointment with Employee Health Services. All health requirements offered at no cost to volunteer.*

WASHINGTON STATE: If we request an investigative consumer report, you have the right, upon written request made within a reasonable period of time after your receipt of this disclosure, to receive from us a complete and accurate disclosure of the nature and scope of the investigation we requested. You also have the right to request from the consumer reporting agency a written summary of your rights and remedies under the Washington Fair Credit Reporting Act.

AUTHORIZATION

I have carefully read and understand this Disclosure and Authorization form and the attached summary of rights under the Fair Credit Reporting Act. By my signature below, I consent to the release of consumer reports and investigative consumer reports prepared by a consumer reporting agency, such as HireRight, Inc., to the Company and its designated representatives and agents. I understand that if the Company hires me, my consent will apply, and the Company may obtain reports, throughout my employment.

I also understand that information contained in my job application or otherwise disclosed by me before or during my employment, if any, may be used for the purpose of obtaining consumer reports and/or investigative consumer reports.

By my signature below, I authorize law enforcement agencies, learning institutions (including public and private schools and universities), information service bureaus, credit bureaus, record/data repositories, courts (federal, state and local), motor vehicle records agencies, my past or present employers, the military, and other individuals and sources to furnish any and all information on me that is requested by the consumer reporting agency.

By my signature below, I certify the information I provided on this form is true and correct. I agree that this Disclosure and Authorization form in original, faxed, photocopied or electronic (including electronically signed) form, will be valid for any reports that may be requested by or on behalf of the Company.

California, Minnesota or Oklahoma applicants only – You will be provided with a free copy of any consumer reports or investigative consumer reports obtained on you if you check the box below.

☐ I wish to receive a free copy of the report.

Applicant Last Name _____ First _____ Middle _____

Address: _____

City: _____ State: _____ Zip Code: _____

Social Security Number: _____

Birth Date: _____

Applicant Signature _____

Date : _____

Form No. 3

DISCLOSURE AND AUTHORIZATION FORM

Catholic Healthcare West may request background information about you from a consumer reporting agency in connection with your employment application and for employment purposes. This information may be obtained in the form of consumer reports and/or investigative consumer reports. These reports may be obtained at any time after receipt of your authorization and, if you are hired by the Company, throughout your employment.

HireRight, Inc., or another consumer reporting agency, will obtain the reports for the Company. HireRight, Inc. is located at 5151 California, Irvine, CA 92617, and can be contacted at 800-400-2761. The reports may contain information bearing on your character, general reputation, personal characteristics, mode of living and credit standing. The types of information that may be obtained include, but are not limited to: social security number verifications; credit reports; criminal records checks; public court records checks; driving records checks; educational records checks; employment verifications; personal and professional references checks; licensing and certification records checks; drug testing results; etc. The information contained in the reports will be obtained from private and public record sources, including, as appropriate, personal interviews with sources, such as neighbors, friends and associates.

You may request more information about the nature and scope of any investigative consumer reports by contacting the Company. A summary of your rights under the Fair Credit Reporting Act is also being provided to you.

ADDITIONAL STATE LAW NOTICES

If you are a California, Maine, New York or Washington applicant, please also note:

CALIFORNIA: Under section 1786.22 of the California Civil Code, you may view the file maintained on you by HireRight during normal business hours. You may also obtain a copy of this file, upon submitting proper identification and paying the costs of duplication services, by appearing at HireRight's offices in person, during normal business hours and on reasonable notice, or by mail. You may also receive a summary of the file by telephone, upon submitting proper identification. HireRight has trained personnel available to explain your file to you, including any coded information. If you appear in person, you may be accompanied by one other person, provided that person furnishes proper identification.

NEW YORK: You have the right, upon request, to be informed of whether or not a consumer report was requested. If a consumer report is requested, you will be provided with the name and address of the consumer reporting agency furnishing the report. You may inspect and receive a copy of the report by contacting that agency.

MAINE: You have the right, upon request, to be informed of whether an investigative consumer report was requested, and if one was requested, the name and address of the consumer reporting agency furnishing the report. You may request and receive from the Company, within five business days of our receipt of your request, the name, address and telephone number of the nearest unit designated to handle inquiries for the consumer reporting agency issuing an investigative consumer report concerning you. You also have the right, under Maine law, to request and promptly receive from all such agencies copies of any such reports.

Form 2.

**DISCLOSURE OF INTENT TO PROCURE INVESTIGATIVE REPORT
INCLUDING CRIMINAL BACKGROUND REPORT**

In connection with your application for employment with catholic healthcare west (“CHW”), CHW hereby provides to you the disclosure requirements mandated by the Fair Credit Reporting Act, as amended, [15, U.S.C. 1681 *et seq.*] And/or California investigative reporting agencies act (IRCAA) [California civil code §§17.86-1786.56]. Summaries of your rights under federal and state law are attached to this disclosure.

Please be advised that CHW may obtain consumer investigative reports about you in connection with your application for employment or application to be a volunteer if CHW makes you a contingent offer of employment, and/or at any time during your employment or service with CHW if you are hired or if you are a current employee.

Such investigative reports may include an investigative consumer report concerning your character and eligibility for employment which may include your creditworthiness, credit standing, credit capacity, character, general reputation, personal characteristics, mode of living, and/or criminal conviction history, including misdemeanor convictions resulting in imprisonment and convictions in military courts (the state of California excludes marijuana related misdemeanor convictions greater than two years old). This information may also be obtained from personal interviews with your professional and personal acquaintances, and may include, but is not limited to reference checks, verification of education and past employment, and investigations into theft, fraud, harassment and workplace violence.

CHW will use any investigation reports solely for employment purposes, including but not limited to reassignment, promotion, retention and rehiring; and CHW will not use the information obtained from the report in violation of any applicable federal, state or local law or regulation, including all equal opportunity laws.

You are further advised that the information obtained will not necessarily preclude your employment at CHW, but the information will be used as part of an overall evaluation of your qualifications and suitability for employment.

You are further advised that you have the right to request a complete disclosure of the nature and scope of the investigation and that you have a right to obtain copies of any investigative reports, including specifically those that adversely affect your employment eligibility.

You are further advised that CHW may not procure such an investigative consumer report unless you provide written authorization for the procurement of the report.

Note: acknowledgement of receipt required:

Please acknowledge your receipt of this Disclosure Notice by signing and dating where indicated on the accompanying Background Screening Authorization and Release.

Para informacion en espanol, visite www.ftc.gov/credit o escribe a la FTC Consumer Response Center, Room 130-A 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under the FCRA. **For more information, including information about additional rights, go to www.ftc.gov/credit or write to: Consumer Response Center, Room 130-A, Federal Trade Commission, 600 Pennsylvania Ave. N.W., Washington, D.C. 20580.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your “file disclosure”). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
 - a person has taken adverse action against you because of information in your credit report;
 - you are the victim of identify theft and place a fraud alert in your file;
 - your file contains inaccurate information as a result of fraud;
 - you are on public assistance;
 - you are unemployed but expect to apply for employment within 60 days.In addition, by September 2005 all consumers will be entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.ftc.gov/credit for additional information.
- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.ftc.gov/credit for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.

- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need -- usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.ftc.gov/credit.
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address from the lists these offers are based on. You may opt-out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.ftc.gov/credit.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. Federal enforcers are:

TYPE OF BUSINESS:	CONTACT:
Consumer reporting agencies, creditors and others not listed below	Federal Trade Commission: Consumer Response Center – FCRA Washington, DC 20580 1-877-382-4357
National banks, federal branches/agencies of foreign banks (word "National" or initials "N.A." appear in or after bank's name)	Office of the Controller of the Currency Compliance Management, Mail Stop 6-6 Washington, DC 20219 800-613-6743
Federal Reserve System member banks (except national banks, and federal branches/agencies of foreign banks)	Federal Reserve Board Division of Consumer & Community Affairs Washington, DC 20551 202-452-3693
Savings associations and federally chartered savings banks (word "Federal" or initials "F.S.B." appear in federal institutions name)	Office of Thrift Supervision Consumer Complaints Washington, DC 20552 800-842-6929
Federal credit unions (words "Federal Credit Union" appear in Institution's name)	National Credit Union Administration 1775 Duke Street Alexandra, VA 22314 703-519-4600
State-chartered banks that are not members of the Federal Reserve System	Federal Deposit Insurance Corporation Consumer Response Center, 2345 Grand Avenue, Suite 100 Kansas City, Missouri 64108-2638 1-877-275-3342
Air, surface, or rail common carriers regulated by former Civil Aeronautics Board or Interstate Commerce Commission	Department of Transportation, Office of Financial Management Washington, DC 20590 202-366-1306
Activities subject to the Packers and Stockyards Act, 1921	Department of Agriculture Office of Deputy Administrator – GIPSA Washington, DC 20250 202-720-7051