

Are you vaccinated against Covi	id-19 (fully or partially)?	\bigcirc Yes \bigcirc No \bigcirc I don't wish to a	nswer
If no, do you plan on getting vac	cinated against Covid-19?	? \bigcirc Yes \bigcirc No \bigcirc I don't wish to	o answer \bigcirc Not applicable
Date	Name		
○ Employed ○ Retired ○	Unemployed Employe	r/Retired From	
Group Affiliation (If applicable)			
Mailing Address			
Preferred Phone (A mobile phon	e is required for our Meals	On Wheels Volunteer Drivers)	
Email			
		rested in? (Please check all that apply.) I Office Help Cafés	
	-	Other	
Make and Model of your vehicle			How did you hear about us?
SCHEDULING (Most volunteer of	○ Friend		
What days of the week are you al	○ Court Appointed		
☐ Monday ☐ Tuesday	O MOWDR Newsletter		
🗌 Friday 🔲 Saturday'	O MOWDR Website		
In what geographic area do you	O Newspaper		
□ Antioch	Crockett	Oakley	
🗆 Alamo	Danville	Orinda	○ Nextdoor
Bay Point	Discovery Bay	Pinole	○ Car Magnet
Bethel Island	🗆 El Cerrito	Pittsburg	○ Other Website
□ Brentwood	Hercules	Pleasant Hill	○ Faith Community
	Knightson	Richmond	○ Radio Ad
Byron	Lafayette	Rodeo	○ Facebook
☐ Clayton	☐ Martinez	San Pablo	○ Television
Concord	Moraga	Walnut Creek	O Billboard
Additional Comments			
			O Presentation
			◯ Other

EMERGENCY CON	ITACT:							
Name:			F	Relationship:		Phone: ()	
You have a choice	to cover the cost of the sc	reening — eith	ner in pa	eers, requests a \$16.00 fee art or in full — off-setting th ble to make this donation:	is expens	e for MOWDR.	•	
I am in good healtl	h and free of communicab	e diseases:	⊖Yes	ONo				
Have you ever volu	Inteered before? OYes	⊖No						

Have you ever volunt If yes, where?						
Level of Education:				Area of Study: _	 	
Technical School/ Ot	her:				 	
My first language is:		Oth	ner langua	ges?	 	

MEALS ON WHEELS VOLUNTEER AGREEMENT (INITIAL ALL)

- I understand that if I am selected for a volunteer assignment that requires a criminal background check, I have the option to make a \$16.00 donation — either in part or full — to MOWDR in order to cover this expense.
- I will not divulge or discuss any confidential information including, but not limited to, private health information, financial situation, name, or home address of any MOWDR clients to anyone at any time, except my volunteer supervisor.
- I give permission for any photograph, video, or audio of myself obtained during volunteer activities to be used in informational material for publicity on the web, print and social media and/or training purposes without compensation from MOWDR or its partners.
- If I become a volunteer, I understand that my volunteering is terminable at will either by MOWDR or me, regardless of the length of my volunteering.
- I will not accept any tips, donations, or gifts from clients.
- I will not receive any compensation for mileage incurred while volunteering for MOWDR.
- I will not volunteer under the influence of drugs or alcohol.
- I will not attempt to sell, proselytize, promote any political opinions, or solicit any services to any clients at any time.
- I will contact my volunteer supervisor as soon as possible if there is any change in my schedule or availability.
- I will return any keys, computers, documents, and property of MOWDR at the end of my volunteer term.
- I am at least 18 years of age. (If I am not, a parent or legal guardian's signature is also required.)
- I am at least 21 years of age. (If I am applying to become a Meals on Wheels driver.)
- I understand that any misrepresentation or omissions on this application may be considered sufficient cause for rejection of this application. By signing this form, I agree that the statements and conditions above are true and correct.

Print Applicant Name

Applicant Signature

Date

Print Guardian Name (if applicable)

Guardian Signature

Date

Please send this completed application to Nicholas Chang, Volunteer Development Associate at volunteer@mowdr.org or 1300 Civic Drive, Walnut Creek CA 94596.