



1401 E. 8th St • Weslaco • Texas • 78596
956.968.8567 • knappmed.org

Thank you for your interest in the Volunteer Services program at Knapp Medical Center. Attached you will find an application that will assist us in making the best use of your talents. Requirements for volunteers are few, but they focus on sharing and concern for others. You will find our Hospital a fascinating place where volunteers are regarded as an important part of the health care team.

Knapp Medical Center is a non-profit, private health care center located on 19 1/2 acres in southeast Weslaco. The 233-bed full service hospital has a 16-bed Intensive Care unit, 19-bed Emergency Room, and a 180-member Medical Staff representing the major medical specialties.

Volunteers serve in over 32 different hospital departments ranging from patient care areas to office work. Every effort is made to match the volunteer's talents and interests with an available volunteer position. The most visible volunteer placements are at the Information Desks and Gift Shop. Although many volunteers join our service with the desire for patient interaction, positions are not limited to these assignments. Many positions exist that require little or no contact with patients.

Depending upon the assignment, typical duties might include: greeting visitors, delivering flowers and mail to patients, transporting patients in wheelchairs, feeding patients, visiting with patients, stocking supplies, answering phones, copying, filing, rocking babies or escorting visitors throughout the hospital.

All volunteers are asked to purchase their own uniforms. Smocks, vests or polo shirts may be purchased from the Volunteer Office (ranging between \$16 - \$18). An orientation class must be attended by all volunteers---these will be scheduled as needed. We usually schedule monthly orientations depending upon the interest. At that time, Hospital philosophy and policy will be discussed, and a tour will be given. The orientation is designed to comply with Federal and State regulations and helps the volunteer feel comfortable with what is expected of them.

Following orientation, the volunteer is assigned to a specific area and commits to working approximately 4 - 5 hours, once a week, sometimes more. After an initial assignment period of 30 hours, the volunteer may be asked to work more often at the discretion of the volunteer's supervisor. Invitation into the Knapp Medical Center Auxiliary is automatic after the initial assignment period.

After you complete the application, call the Volunteer Office 969-5144 to arrange an interview with our Volunteer Coordinator Denise Ledesma. At that time we will discuss your special interests and perhaps arrive at an assignment we both feel can best use your talents and skills.

Lynn Carter
Director of Guest and Volunteer Services
(956) 969-5239
lcarter@knappmed.org
www.knappmed.org

**KNAPP MEDICAL CENTER
APPLICATION FOR VOLUNTEER SERVICE**

NAME: _____
(Last) (First) (Name to be used on Nametag)

SPOUSE'S NAME (If Married) _____

MAILING ADDRESS: _____
(City) (Zip)

PHONE: _____ **CELL PHONE:** _____

BIRTHDATE: _____ **EMAIL ADDRESS:** _____
(Month) (Day) (Year)

Last 4 digits of your SOCIAL SECURITY NUMBER _____ **XXX - XX -**

<p>In Case of Emergency notify:</p> <p>NAME: _____ Phone: _____</p> <p>RELATIONSHIP: _____</p> <p>PHYSICIANS NAME _____ Phone: _____</p>
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- I am:**
- Employed
 - Un-employed
 - Retired
 - Student

<p>EDUCATION: (check all that apply)</p> <table><tr><td><input type="checkbox"/> High School Graduate/GED</td><td><input type="checkbox"/> Undergraduate Degree</td></tr><tr><td><input type="checkbox"/> Associate's Degree</td><td>School _____</td></tr><tr><td>School _____</td><td>Major _____</td></tr><tr><td>Major _____</td><td><input type="checkbox"/> Other _____</td></tr></table>	<input type="checkbox"/> High School Graduate/GED	<input type="checkbox"/> Undergraduate Degree	<input type="checkbox"/> Associate's Degree	School _____	School _____	Major _____	Major _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> High School Graduate/GED	<input type="checkbox"/> Undergraduate Degree							
<input type="checkbox"/> Associate's Degree	School _____							
School _____	Major _____							
Major _____	<input type="checkbox"/> Other _____							

If Student – name of school:

WORK EXPERIENCE: _____

PREVIOUS VOLUNTEER EXPERIENCE: _____

LIST SPECIAL INTERESTS, HOBBIES, SKILLS: _____

-over-

