

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. Once Application is turned in, a background check will be done which normally takes 3 – 4 days, once that is done, we will call you to set up a time for orientation.

Knapp Medical Center is a non-profit, private health care center located on 19-1/2 acres in southeast Weslaco. The 227-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 20+ 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 Desk 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, visiting with patients, stocking supplies, answering phones, copying, filing, feeding babies or escorting visitors throughout the hospital.

Uniforms will be provided FREE for Permanent and Winter Texans, but students will be required to purchase **polo shirts at the Volunteer Office for (\$20)**. An orientation class must be attended by all volunteers---these will be scheduled as needed. We usually schedule bi-weekly orientations depending upon the applications. 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.

Our 2-1/2 hour Orientation will consist of hospital information, safety and health information, then we will process your Badge, TB Test (Skin Test), hospital tour, and get your uniform. Once the process is done, we will find a specific department and can start volunteering approximately 4 - 5 hours, once a week, sometimes more.

***** **For College Students, we do require a minimum of 75 hours.**

Smelda Ambriz

Manager of Volunteer Services & KMC Auxiliary Volunteers Gift Shop



**Knapp
Medical Center**

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together everyone
TEAM
achieves more

Application for Volunteer Service

Name: _____
(Last) (First)

Mailing Address: _____

(City) (Zip)

Birthdate: _____ **Cell Phone:** _____
(Month) (Day) (Year)

Email Address: _____

Name of Employer: _____

Work Experience: _____

Department to Volunteer: _____

Student – Acceptance Requirement of 75 Hours

Name of School: _____

Name of Course/Program Applying: _____

Total Number of Hours for Course/Program: _____

Activity Level:

- Very Active (capable of walking distances and pushing wheelchairs)
- Moderately Active (some walking)
- Limited Activity (requires mostly sitting)

Other: _____

Notify In An Emergency:

Name: _____ **Phone:** _____

Relationship: _____

Volunteer Experience: _____

I Would Like To Volunteer: _____

How Did You Hear About Our Volunteer Program? _____

List Special Interests, Hobbies, Skills: _____

**Please List Two References (Not Related To You)
We May Contact If Necessary:**

Name **Phone Number**

Name **Phone Number**

Have you ever been convicted of or pled guilty or nolo contendere to, or had deferred adjudication for a felony or other crime? (Answering **Yes**, will not necessarily disqualify you to volunteer) Yes No

If yes, describe in full, including dates and locations.

Conviction will not necessarily bar volunteer service _____

I hereby certify that the information I supplied in this application is true, complete and correct to the best of my knowledge and I understand that any information I withheld or falsely provided in connection with the foregoing application shall be cause of rejection of this application or termination of volunteer status. I hereby authorize Knapp Medical Center, without liability, to contact references I have given and authorize said reference to make full response to any inquiries by Knapp Medical Center in connection with this application for volunteer service. Once I have completed orientation, and before I am assigned to Volunteer, I understand that Knapp Medical Center will complete a criminal background check on me.

Volunteer Signature

Date

The Department of Volunteer Services is responsible for providing competent volunteers to fulfill the needs and requirements of Knapp Medical Center. Revised 2/18

