



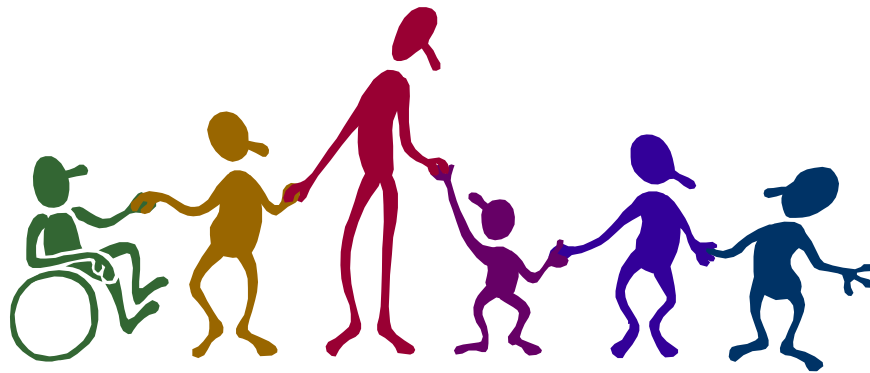
Therapeutic Recreation Services of the Roanoke Valley

VOLUNTEER OPPORTUNITY!

Therapeutic Recreation Services of the Roanoke Valley is now accepting applications to volunteers for all semesters!

It is a great opportunity for students needing professional experience for degree requirements, who are enrolled in a human service field. The position offers the following benefits:

- Choose your own hours and activities you want to help with from a list of scheduled programs.
- Work as many hours as you want, work as few as you want.
- Volunteer positions have the potential to advance to a paid support staff position.
- Receive signed letter stating hours and type of service for your records.
- Able to participate in full-time staff training provided year round
- Gain experience working with disabilities and make great connections



Therapeutic Recreation Volunteer Application



The Brambleton Center – 3738 Brambleton Ave
Roanoke VA 24018 – 540-772-7529 X 2





Therapeutic Recreation Services of the Roanoke Valley

Name: _____ Today's Date ___/___/___

Home Address: _____

City/State/Zip: _____

Home/Cell Phone: _____ Work/cell Phone: _____

Birth Date ___/___/___ Email: _____

Emergency Contact:

Name: _____ Phone: _____ Relationship: _____

Social Security Number: _____ (for risk management purposes)

Availability: ___ Days ___ Evenings ___ Weekends ___ Holidays

Have you had any previous volunteer experience? If so, please describe the nature of your responsibilities:

Please list any skills, experience, education, interests or talents, abilities or special qualifications which you feel would help you perform duties as a volunteer for Therapeutic Recreation Services and working with people with disabilities:

Do you have any medical concerns that we need to be aware of, and are there any duties that you may feel uncomfortable performing (*assisting to the restroom, assisting with feeding, etc.....*)?

Are you volunteering through your school?

Must provide a certificate of insurance through your school- must be provided

Any additional comments or concerns:

Would you be willing to submit to a Criminal History Background Report? ___ YES ___ NO

Signature _____ Today's Date: ___/___/___



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