



# VCU Medical Center

## JUNIOR VOLUNTEER PROGRAM 2015

Thank you for considering applying to the summer Junior Volunteer Program! **The program has been redesigned for 2015, so please read the following information carefully.** If you have questions after reading over the packet, please call Volunteer Services at (804) 828-0922.

### General Information about the Program

The Junior Volunteer Program is an opportunity for high school students to provide valuable, voluntary service in their community. It is also designed to introduce them to an urban, comprehensive academic medical center. This program has become very popular, and acceptance can be competitive, depending on how many applications are received. This year there are spaces for fifty (50) participants in the program.

The program will last for ten weeks, from June 22-August 28, 2015. Volunteer shifts will be either 9am-12pm or 12pm-3pm on weekdays. Each participant will be expected to volunteer during their designated shift, on the same day at the same time, for at least eight (8) of the ten (10) weeks.

Volunteer Opportunities for new Junior Volunteers:

- *Activity Assistant* at the Family Care Center on the MCV Campus. Activity Assistants work with infants or children up to five years of age in classrooms designed for age-appropriate learning and play.
- *Patient/Visitor Information Assistant* at some of the hospital and clinic buildings. Patient/Visitor Information Assistants are based at our busiest entrances to guide patients and visitors to their correct destination within our complex of buildings.

Note: There will be a limited number of placements in each opportunity during each shift.

In addition to their regular volunteer shift, participants will have the option at various times during the ten weeks to attend special activities featuring guest speakers that will educate them about healthcare professions and patient experiences.

### How the Application Process Works

Applications must be faxed or mailed (postmarked) by March 2 in order to be considered. A guidance counselor/teacher recommendation is required in addition to the completed application. This application packet includes a recommendation form to be completed by your guidance counselor or a teacher who knows you well. The recommendation form must also be faxed or mailed to us (postmarked) by March 2. Forms submitted to us directly by the counselor or teacher will be kept confidential.

Everyone who submits a completed application and recommendation form by March 2 will be offered an interview. The interview gives us an opportunity to meet each other and for you to see where we are located. It will help you, and us, decide if this is the right place for you to volunteer.

On your application, you will indicate who we should contact to set up your individual interview. Interviews will take place in the Volunteer Services office in the Main Hospital.

## **Acceptance into the Program**

Due to the volume of applications expected, it will take some time to complete interviews. Once interviews are complete and all decisions have been made, Volunteer Services will notify applicants by mail. Individuals who are not offered a placement initially will be placed on a waiting list.

Individuals who are offered a placement in the program will be given instructions to complete the requirements of becoming a volunteer. Requirements will include completing and returning participation forms, submitting documentation of specified immunizations and tuberculosis testing, and attending a Volunteer Orientation. There will be specific deadlines for completing each of the requirements. It will be the responsibility of each selected applicant to complete those requirements by the deadlines given in order to continue the process and participate in the program. Multiple dates and times will be offered for Orientation, and will be specified in the letters sent to those offered a placement in the program. Participants will be asked to pay a \$25 fee that helps defray the costs of the program, including uniform shirts, ID badges, and activities.



## **FAQ's - Answers to some common questions!**

### **Will I get any “hands on” experience with patients?**

New Junior Volunteers will provide service in one of the two areas mentioned above (Activity Assistant or Patient/Visitor Information Assistant), not in any clinical areas. Anyone who provides direct patient care must be properly trained and licensed and this is not permitted for volunteers at VCU Medical Center. All volunteer experience is valuable in many ways, and a good chance to learn what a healthcare environment is really like.

### **What if I don't know the dates of my summer plans (family vacation, camps, etc.)?**

We expect all participants to be available for a minimum of (8) of the (10) weeks of the program. We allow two (2) of the ten (10) weeks to be missed to accommodate other summer plans such as vacations and camps. If you find out after submitting your application that you would miss more than two shifts (two weeks of the program), you will need to notify us.

### **What if I am accepted and then need to miss more than two shifts?**

We ask that you take your volunteer commitment seriously, especially since we are already allowing two of the ten weeks to be missed. Unforeseen circumstances will be handled on an individual basis.

### **What is Volunteer Orientation?**

Attendance at a Volunteer Orientation is mandatory for all new volunteers. These classroom-style sessions are when we go over important information that includes safety guidelines, infection control, rules and regulations, patient confidentiality, and much more. We will offer multiple dates and times for participants to attend Volunteer Orientation before the first week of the program. The options will be specified in the letters mailed to those selected to participate.

**If you have questions that are not answered anywhere in this packet of materials that you need answered before we contact you to schedule your interview, please call the Volunteer Services office at 828-0922.**

# **JUNIOR VOLUNTEER PROGRAM 2015 APPLICATION**

## **VCU Medical Center Volunteer Services**

Completed applications must be returned (faxed or postmarked) **no later than March 2** to:  
Junior Volunteer Program, 1250 E. Marshall St., Box 980256, Richmond VA 23298-0256  
Or faxed to Volunteer Services at (804) 828-4752

NAME \_\_\_\_\_ NICKNAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/ST/ZIP \_\_\_\_\_

PHONE # \_\_\_\_\_ EMAIL ADDRESS \_\_\_\_\_

M\_\_\_\_ F\_\_\_\_ Will you be at least 14 years old by June 15, 2015? Y\_\_\_\_ N\_\_\_\_

GRADE LEVEL 2014-2015 \_\_\_\_\_ SCHOOL \_\_\_\_\_

Have you ever participated in or applied for this program before? Y\_\_\_\_ N\_\_\_\_

Who should be contacted to schedule an interview? Name \_\_\_\_\_

Daytime Phone \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_

### **APPLICANT:**

I have reviewed the information provided as part of the application packet and I hereby apply to be a Junior Volunteer. I understand that applying does not guarantee acceptance into the program. If I am accepted as a volunteer, I understand that my participation is contingent upon supplying the required information by the deadlines given, attending a mandatory orientation, and complying with the rules and regulations of the VCU Health System and the Volunteer Services Office. I understand that if I am accepted as a volunteer, I am committing to volunteer on my scheduled day and time for at least eight of the ten weeks of the program.

Applicant Signature \_\_\_\_\_ Date \_\_\_\_\_

### **PARENT/GUARDIAN:**

I have reviewed the information provided as part of the application packet and the above-named applicant has my permission to apply to participate in the Junior Volunteer Program. I understand that applying does not guarantee acceptance into the program. I also understand that, if the applicant is accepted, participation is contingent upon supplying the required information by the deadlines given, the applicant attending a mandatory orientation, and complying with the rules and regulations of the VCU Health System and the Volunteer Services Office. I understand that, if accepted as a volunteer, the applicant is committing to volunteering at least eight of the ten weeks of the program.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Parent/Guardian Name \_\_\_\_\_

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Based on the brief descriptions provided, which volunteer opportunity appeals to you?

\_\_\_\_\_ Activity Assistant (Family Care Center)

\_\_\_\_\_ Patient/Visitor Information Assistant \_\_\_\_\_ Either!

Do you already know which day(s) of the week you would be available during the summer?  
Please check below which shift(s) you would consider. (Each participant will be assigned a shift that is the same day, the same time, for the ten weeks of the program.)

	Monday	Tuesday	Wednesday	Thursday	Friday
9am-12pm					
12pm-3pm					

**JUNIOR VOLUNTEER PROGRAM 2015**  
**VCU Medical Center Volunteer Services**

**RECOMMENDATION FORM**

**Completed recommendations must be returned (faxed or postmarked) by March 2 to:**  
Junior Volunteer Program, 1250 E. Marshall St., Box 980256, Richmond VA 23298-0256  
Fax: 804-828-4752

**Applicant:** Write your name on the line below and then give this form to the teacher or guidance counselor of your choice who knows you well enough to answer these questions.

**Name of Junior Volunteer Applicant** \_\_\_\_\_

**To the Recommender:** This student is applying to be a Junior Volunteer at VCU Medical Center this summer. This is a competitive program with a limited number of spaces. In order to help us get to know this applicant, please answer the following questions to the best of your ability. Then return it to us by March 2 (address and fax above). Forms submitted to us directly will be kept confidential. Thank you for taking the time to tell us about this student.

Your Name \_\_\_\_\_

School/Organization \_\_\_\_\_ Phone \_\_\_\_\_

How long have you known this applicant? \_\_\_\_\_ In what capacity? \_\_\_\_\_

**This individual follows directions**

- |   |  |
|---|--|
| <input type="checkbox"/> always           | <input type="checkbox"/> only if supervised                        |
| <input type="checkbox"/> most of the time | <input type="checkbox"/> I have had no opportunity to observe this |

**This individual can be trusted to abide by rules and regulations**

- |   |  |
|---|--|
| <input type="checkbox"/> always           | <input type="checkbox"/> only if supervised                        |
| <input type="checkbox"/> most of the time | <input type="checkbox"/> I have had no opportunity to observe this |

**Please check off as many of the following characteristics as you believe describe this individual:**

- |  |  |
|--|--|
| <input type="checkbox"/> works best on his/her own   | <input type="checkbox"/> would work best in pairs            |
| <input type="checkbox"/> works well in a group       | <input type="checkbox"/> is reluctant to participate         |
| <input type="checkbox"/> speaks only when spoken to  | <input type="checkbox"/> tends to be outspoken               |
| <input type="checkbox"/> somewhat reserved           | <input type="checkbox"/> loves to talk                       |
| <input type="checkbox"/> follows rather than leads   | <input type="checkbox"/> a natural leader                    |
| <input type="checkbox"/> follows instructions well   | <input type="checkbox"/> easily distracted                   |
| <input type="checkbox"/> eager to try new things     | <input type="checkbox"/> insecure in unfamiliar surroundings |
| <input type="checkbox"/> a team player               | <input type="checkbox"/> needs to be center of attention     |
| <input type="checkbox"/> easily influenced by others | <input type="checkbox"/> can be trusted on his/her own       |
| <input type="checkbox"/> motivated to excel          | <input type="checkbox"/> always smiling                      |
| <input type="checkbox"/> self-confident              | <input type="checkbox"/> friendly and outgoing               |

We rely on Junior Volunteers to perform their duties accurately and efficiently. We seek volunteers who are capable of quickly learning rules and tasks, and are able to respond or seek assistance quickly and appropriately in a large, busy environment.

**In your opinion, does this individual meet those qualifications? Y / N**

**Would you recommend this individual for this program?**

Highly recommend     Recommend with Reservation(s)     Do Not Recommend at this time

Is there anything else you think we should know about this applicant? Please use the back of this page or a separate sheet to share any comments or stories you believe are relevant.

*Thank you!*