

LSVP Registration Form

Coles County Council on Aging, Inc.
11021 East County Road 800 N
Charleston IL 61920-8632

DATE : _____ **Preferred way to be contacted: A, B or C** _____

First Name	Middle Initial	Last Name	A.	Landline Phone Number	B.	Text?
Mailing Address				City	State	Zip Code
Date of Birth (MM/DD/YY)	Age	Sex (M/F)	C.	E-mail address	County	

Emergency Contact Information:

Name/Relationship to You	Phone
Address	

Ethnicity: (optional)

- | | |
|--|---|
| <input type="checkbox"/> White/Caucasian | <input type="checkbox"/> Am Indian/Alaskan Native |
| <input type="checkbox"/> Asian | <input type="checkbox"/> Black/African American |
| <input type="checkbox"/> Hispanic | <input type="checkbox"/> Other |

Where did you hear about LSVP Volunteers?

- | | | |
|---------------------------------------|------------------------------------|---|
| <input type="checkbox"/> Friend | <input type="checkbox"/> Newspaper | <input type="checkbox"/> LSVP Volunteer |
| <input type="checkbox"/> TV/Radio | <input type="checkbox"/> Staff | |
| <input type="checkbox"/> Other: _____ | | |

Do you prefer any specific volunteer assignments?

Are you a Veteran? Circle YES or NO

As a volunteer, you are insured for accident and personal liability while volunteering at a volunteer site. ***This is strictly a secondary insurance.*** Since there is an accidental death benefit involved, you are asked to name a beneficiary.

Name of Beneficiary and Relationship to You	
Address of Beneficiary	Phone #

I volunteer my services through the LSVP Volunteer Program of and give permission to use my likeness in publications and promotional materials. I understand that I am not an employee of Coles County Council on Aging, Inc. LSVP Volunteer Program

Volunteer Signature **Date**

LSVP Coordinator Signature Date

How will you get to your volunteer activities?

- My own car
(If checked, please provide license and insurance information below)
- Other transportation: _____

I understand that if I use my personal automobile in my volunteer service, I will arrange to keep in effect automobile liability insurance equal to the minimum requirement of our state. **For insurance purposes, please provide your driver's license card number and insurance information.**

Driver's License Number
Insurance Company

Previous/Current Employer

Previous/Current Occupation

LSVP PROJECTS Check all that apply	
<input type="checkbox"/> Advisory Council <input type="checkbox"/> Assistance to Veterans <input type="checkbox"/> Welcome Desk <input type="checkbox"/> VITA <input type="checkbox"/> SHIP <input type="checkbox"/> Jonah Fish Fry <input type="checkbox"/> Exercise Classes <input type="checkbox"/> Line Dancing <input type="checkbox"/> Wig Boutique	<input type="checkbox"/> Senior Expo <input type="checkbox"/> LSVP Events <input type="checkbox"/> Movie Theater <input type="checkbox"/> Other _____

If Applicable: _____

Volunteer Anniversary Date

LSVP Application (continued)**Skills and Interests**

(Please check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Animals
(Work w/animals, Humane Society, Zoos) | <input type="checkbox"/> Language/Translation
(Bi-lingual: Spanish, Vietnamese, Sign-Language.) |
| <input type="checkbox"/> Baking/Cooking | <input type="checkbox"/> Leadership
(Serve on Boards, Committees, Advisory Councils) |
| <input type="checkbox"/> Board/Card Games/Bingo | <input type="checkbox"/> Library Aide |
| <input type="checkbox"/> Bookkeeping/Accounting | <input type="checkbox"/> Mailings Preparation
(Prepare bulk mailings, stuff envelopes, etc.) |
| <input type="checkbox"/> Children
(Reading to children, crafts/games, daycare) | <input type="checkbox"/> Meal Site Helper
(Assist at Senior Meal Sites) |
| <input type="checkbox"/> Clerical
(Filing, typing, copying, information desk) | <input type="checkbox"/> Mentoring
(Youth and Adult Mentoring) |
| <input type="checkbox"/> Clerk/Cashier
(Cash register, take/exchange money, Gift Shop) | <input type="checkbox"/> Museum Aide
(Docent, Art Study, Tour Guide, Greeter) |
| <input type="checkbox"/> Computer Skills
(Word processing, Data-entry) | <input type="checkbox"/> Music/Musician
(Study music, play an instrument other than piano or organ) |
| <input type="checkbox"/> Counseling/Support/Social Services | <input type="checkbox"/> Organizational
(Organize work assignments, people, events) |
| <input type="checkbox"/> Crafts/Painting | <input type="checkbox"/> Photography/Video |
| <input type="checkbox"/> Dancing | <input type="checkbox"/> Pianist/Organist |
| <input type="checkbox"/> Disabilities
(Work with adults and children with disabilities, Reading to the visually impaired) | <input type="checkbox"/> Public Speaking |
| <input type="checkbox"/> Disaster Preparedness/Storm Watchers | <input type="checkbox"/> Repair/Maintenance/Chores |
| <input type="checkbox"/> Emergency/Security/Police/Fire | <input type="checkbox"/> Respite/Caregiver Relief |
| <input type="checkbox"/> Entertainment | <input type="checkbox"/> Sewing/Needlework |
| <input type="checkbox"/> Environmental
(Clean up, awareness, etc.) | <input type="checkbox"/> Shopping Assistance
(Assist seniors and shut-ins with shopping) |
| <input type="checkbox"/> Fitness/Sports
(Walking, biking, running, aerobics, golf, bowling, Senior Olympics, fishing, camping, hunting, hiking) | <input type="checkbox"/> Singing |
| <input type="checkbox"/> Food Bank | <input type="checkbox"/> Tax Preparation |
| <input type="checkbox"/> Friendly Visitor
(Visiting shut-ins, Nursing home residents) | <input type="checkbox"/> Teaching/Training
(Teach a skill or craft, train other volunteers) |
| <input type="checkbox"/> Fund Raising | <input type="checkbox"/> Telephone/Reception
(Answer phones in an office environment, multiple phone lines, Receptionist) |
| <input type="checkbox"/> Gardening/Botany | <input type="checkbox"/> Telephone Visitor
(Reassurance/Information gathering) |
| <input type="checkbox"/> General
(I can help with anything, conferences, event help) | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Health Services
(Patient assistance, Nursing assistant, Blood bank) | <input type="checkbox"/> Tutor/English Language Instruction
(Working with children, adults, family literacy) |
| <input type="checkbox"/> Home-Delivered Meals | <input type="checkbox"/> Writing
(Writing letters for fundraising, assisting handicapped seniors to write letters or pay bills) |
| <input type="checkbox"/> Interpersonal/Hosting/Greeter
(Works well w/people; Greet people at the door, take tickets, seat people, reservations) | |
| <input type="checkbox"/> Knitting/Crocheting | |

KEEP THIS FOR YOUR RECORDS

Basic Provisions:

1. Separation from Volunteer Service:

The Volunteer Coordinator may request the removal of a LifeSpan Volunteer at any time. The LSV may withdraw from service at CCCoA or from the LifeSpan Volunteer Program at any time. Discussion of individual separations will occur among appropriate CCCoA staff, appropriate LSVP staff and the volunteer to clarify the reasons, resolve conflicts or take remedial action.

2. Prohibited Activities for LSVP Volunteers:

- (a) *Political activities.* While acting as an LSV, volunteers may not finance, directly or indirectly, any activity to influence the outcome of any election to public office, or any voter registration activity. Volunteer services may not be conducted in a manner involving the use of funds or the provision of services in a matter supporting or resulting in the identification of the volunteer services with:
- Any partisan or nonpartisan political activity associated with a candidate, or contending faction or group, in an election; or
 - (b) Any activity to provide voters or prospective voters with transportation to the polls or similar assistance in connection with any such election; or
 - (c) Any voter registration activity, except that voter registration applications and nonpartisan voter registration information may be made available to the public at the premises of the sponsor. But in making registration applications and nonpartisan voter registration information available, volunteers shall not express preferences or seek to influence decisions concerning any candidate, political party, election issue, or voting decision.
- (b) *Non-displacement of employed workers.* A LSVP Volunteer shall not perform any service or duty or engage in any activity which would otherwise be performed by an employed worker or which would supplant the hiring of or result in the displacement of employed workers, or impair existing contracts for service.
- (c) *Fees for services.* Under no circumstances shall any LSVP Volunteer receive a fee for service from service recipients, their legal guardian, members of their family, or friends.
- (d) *Religious activities.* A LSVP Volunteer or a member of the project staff shall not give religious instruction, conduct worship services or engage in any form of proselytization as part of his/her duties.

3. Accessibility and Reasonable Accommodation:

The LSVP Coordinator will ensure that programs and activities to which LSVP volunteers are assigned are accessible to persons with disabilities. If there are certain Volunteer activities which are not so accessible, the Volunteer will inform the LSVP Director so that appropriate placement of volunteers may be made with reasonable accommodations. The LSVP Coordinator will work to explore possible accommodations for qualified volunteers with disabilities. The LSVP will also ensure that information will be maintained confidentially and not communicated to others without the documented consent of the individual.

4. Prohibition of Discrimination:

The Volunteer Coordinator will not discriminate against qualified LSVP volunteers on the basis of race, color, national origin or ethnicity, gender, age, sexual orientation, political affiliation, religion or disability. We adhere to the LSVP Terms and Conditions Policy document (revised on 10-1-2012) and the CCCoA non-discrimination policy.