



A Member of Covenant Health

For Office Use Only:

Badge #: _____

COLLEGE/UNIVERSITY STUDENTS –2023 VOLUNTEER APPLICATION

Name: _____ Date: _____
(Last) (First) (M)

Current Address: _____ Telephone: _____
(Street) (City, State, Zip)

E-Mail Address: _____ Date of Birth: _____

Social Security Number _____

College /University attending: _____ Anticipated year of graduation: _____

Brief description of employment you have held in the past:

Job skills or special training:

Memberships in campus/community organizations:

Prior volunteer experiences:

Have you any limitations or health conditions which should be taken into consideration before determining a volunteer assignment? ☐ Yes ☐ No

If Yes, please explain: _____

Person to contact in event of emergency: _____ Relationship: _____

Address: _____ Telephone: _____

Preferred days to volunteer: (circle those that apply) Monday Tuesday Wednesday Thursday Friday

Preferred Shift: Mornings _____ Afternoons _____

Academic or Employment References: please list two including addresses and phone numbers:

ATTENTION All NEW volunteers are required to have a TB test (PPD). The State of Maine requires immunizations against Measles (Rubeola), Mumps, Rubella, Varicella (Chicken Pox), and Pertussis (usually combined with tetanus as tdap). Annual flu and Covid 19 vaccines are also required. Hepatitis B is optional.

Immunization Records must be provided before you start volunteer service. If you have not had a TB (Tuberculosis) test for over a year, St. Mary's will provide the test at no-cost to you. You may also have this test performed at your college/university Health Center and have the results faxed to us at 777-4397. Flu vaccines are mandatory. Volunteers are required to provide proof of Covid – 19 Vaccines per CDC requirements.

Return completed application to:

Volunteer Services Department
St. Mary's Regional Medical Center
P.O. Box 291
Lewiston, ME 04243-0291
Email: rgamache@stmarysmaine.com

Telephone: (207) 777-8368
Fax: (207) 777-4397

CONFIDENTIALITY STATEMENT

I, _____, a volunteer of St. Mary's Health System, understand and agree that any information regarding patients/residents, or any other information which is disclosed to me or that I learn or observe, is confidential. I understand that if I disclose any such information that this could lead to my dismissal.

HARRASSMENT POLICY

I, _____, a volunteer of St. Mary's Health System, understand that this organization has a zero-tolerance policy for harassment/bullying of any type. I understand that if I behave in a manner unfitting to our harassment policy or core values, my actions could lead to my dismissal.



Volunteer Ethics and Confidentiality Pledge

The health, privacy, dignity and wellbeing of patients are the primary concerns of everyone within the St. Mary's Health System. Volunteers and employees are expected to observe the following standards of ethical conduct as responsible members of the St. Mary's team.

- 1. Volunteers must hold as confidential all information obtained directly or indirectly from hospital records and/or interactions of any kind related to patients and their care.***
- 2. Volunteers are asked to be punctual and conscientious and respectful of the four St. Mary's core Mission Values: Compassion; Integrity, Collaboration and Excellence. Volunteers endeavor to make their volunteer service professional in every way by not bringing personal problems into the workplace or discussing private or confidential matters of others in an open way.***
- 3. Volunteers are asked to be mindful and respectful of differences of opinion, personal values and religious preferences. St. Mary's has a zero-tolerance policy regarding sexual harassment or harassment of any kind. Adult volunteers are asked to be considerate of junior volunteers and to refrain from adult conversations that might be inappropriate and/or misunderstood. Junior volunteers are expected to conduct themselves at age-appropriate levels always.***
- 4. Volunteers should attempt to resolve any problems relating to their volunteer service with the Volunteer Services Manager.***
- 5. Volunteers need to follow guidelines concerning personal health and safety and will report any incident that endangers their health or safety or the health and safety of others.***
- 6. Volunteers shall not sell or attempt to sell goods or services, request contributions, or solicit persons to sign or distribute political petitions or religious material while volunteering for St. Mary's Health System.***
- 7. Volunteers' services are donated without contemplation of compensation or future employment, and given for humanitarian, and or charitable reasons.***

I have read the above ethics statement and agree to uphold these standards to the very best of my ability.

Volunteer's Name _____

Date: _____