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VOP Initial Telephone Screening

Applicant: _____

Interviewer: _____

Date: _____

Result:

1) Past volunteer experiences:

2) Motivation to apply as a volunteer:

3)/4) Expectations for volunteer service:

5) Past experience maintaining confidentiality:

6) Past experience with advocacy and/or abiding by policy:

7) Do they think they can volunteer in a long-term care environment?

8) Outlets for stress:

9) Best way to contact/communicate:

10) Training information:

11) Other questions/information
