

APPLICANT NAME: _____

VOLUNTEER TRACKING FORM

	Date:	Checked by:
Interviewed?		
References Checked?		
Notified of Acceptance?		

Will attend training Yes _____ No _____

Contact again for next training? Yes _____ No _____

Comments: _____

NOTIFIED OF UNSUITABILITY Date: _____ By: _____

Comments, including any referrals: _____

Other notes and comments:

**Consider asking: What experience, if any, have you had with people with dementia?
Give scenario in which just being there and observing a resident's condition is part of the job.**

**NORTHERN VIRGINIA LONG-TERM CARE
OMBUDSMAN PROGRAM**

Volunteer Interview Form

Applicant's Name _____

Interviewer _____ Date _____

I. Motivation and Interest

- What interests you about volunteering for the Ombudsman Program?

- What is your experience with nursing homes or assisted living facilities?

- Tell me about your last volunteer experience. What was the challenge? How would you describe your relations with the agency staff? Why did you decide to leave?

II. Education, Aptitude or Skills

Is there anything about your education, aptitudes or skills that would pertain to this volunteer assignment?

III. Attitudes and Values

- What is it about working with older adults that interests you?

- Why do you think that having volunteer ombudsmen for nursing homes and assisted living facilities is a good idea?

•How do you deal with frustration, anger?

(1) When someone is directing it at you

(2) When you are experiencing it.

•How would a friend or associate describe you?

•Points to mention about this work:

- Lots of ambiguity/grey
- Need to be satisfied with small accomplishments
- Need people who are diplomatic, good communicators, sensitive, can tolerate conflict

IV.Placement Information

•Availability: Time, geographic area, etc.

Hand applicant Sheet with the commitments we request.

Do you think you will have any problem meeting any of these expectations?

V.Interviewer's Comments

Action Recommended:

The Ombudsman Program asks its volunteers to make the following commitments:

- 1. To volunteer for one year after training.*
- 2. To visit the facility to which you are assigned for four hours per week during the business day, Monday thru Friday, except when you are ill or on vacation. Occasional (once a month) weekend or evening visits are permitted.*
- 3. To call the Coordinator of Volunteers or other staff to discuss suspicions or reports of abuse, neglect or exploitation,*
- 4. To alert staff to problems that are not getting resolved.*
- 5. To complete our two-page monthly report form, and submit it via e-mail, fax or U.S. mail.*
- 6. To attend the Volunteer Ombudsman in-service meetings. (They are two hours long, and are held five or six times in a calendar year.)*
- 7. To fill out other written reports that might be necessary.*

(Applicant may keep this for reference if desired.)

Training Dates: Thursday, September 18, Friday, September 19 and Thursday, September 25, 2003