**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 (use back if needed)**