

RSVP Volunteer Program

Western Dairyland, E.O.C., Inc.
P.O. Box 125
Independence, WI 54747



Lead With Experience!

(800) 782-1063 ext. 1205
or (715) 985-2391 ext. 1205
cheryl.padula@wdeoc.org

Volunteer Registration

FIRST NAME

LAST NAME

STREET ADDRESS (& mailing if different)

CITY

STATE

ZIP CODE

(_____) _____
PHONE NUMBER

E-MAIL ADDRESS

Gender Male Female

____/____/____ (month/day/year)
BIRTHDATE

Ethnicity

- White/Caucasian Native American Asian
 Hispanic/Latino African American Pacific Islander

Do you have disabilities or restrictions? NO YES, please describe: _____

Are you a veteran of the U.S. Armed Forces? NO YES

Where did you hear about RSVP? _____

Do you currently volunteer? NO YES, where? _____

Education

- Elementary
 High School Grad/GED
 Vocational
 Associate's Degree
 Bachelor's Degree
 Master's Degree
 Ph.D

List past occupations:

List your hobbies/activities:

List places you would like to volunteer:

Are you willing to be put on an On-Call List for special events or projects? YES NO

OVER

RSVP Volunteer Program

Western Dairyland EOC

P. O. Box 125, Independence, WI 54747
(715) 985-2391 or (800) 782-1063 ext. 1205



“Leading with experience”

CONFIDENTIALITY STATEMENT

It is important to the Western Dairyland RSVP Volunteer Program to maintain confidentiality of private information relating to your RSVP volunteer placement. During the course of your volunteer activities you may come across confidential information about the people, services, and organization you volunteer with. Discussing or sharing confidential information on a casual basis at your volunteer site, in your home, or in public violates privacy. Any questions regarding confidentiality should be directed to the volunteer site supervisor or RSVP Program Director.

Confidential information includes but is not limited to:

- Written records, documents, forms, messages
- Electronic files, emails, software content
- Casual conversations, meetings, phone calls, verbal messages
- Personal information about clients, patients, participants, students, staff, volunteers
- Information on volunteer site operations, financials, and activities

CONFIDENTIALITY AGREEMENT

During the course of activities as an RSVP Volunteer, I understand that it is my legal and ethical responsibility to keep confidential all information that relates to my RSVP volunteer activities. I understand that if I breach confidentiality, whether intentional or unintentional, I may be subject to disciplinary action.

By signing my name below, I acknowledge that I have read and understood the information on this form. I also understand that a copy of this form will be provided to the RSVP volunteer site where I am assigned if requested by the site supervisor.

Name (Printed)

Date

Signature