

## **Volunteer Application Questionnaire**

Revised 01/12

**DATE:**

**Volunteer Candidate NAME:**

**What are your reasons for volunteering?**

**Why did you choose Munson Medical Center to volunteer?**

**Please list your interests, hobbies and any special skills you would be willing to share.**

**What is your availability (hours, days etc) for your volunteer commitment?**

**Do you go away for the winter and/or summer months for more than one month or more?**

**Do you have any health issues or physical limitations that might prevent you from performing certain types of volunteer work?**

**Do you have your own transportation to and from the hospital?**