# **Volunteering at Halton Long-Term-Care Homes**

## **Volunteer Application Checklist**

- 1. Complete a Volunteer Application
- 2. Dial 311 to set up an interview with a life enrichment supervisor at one of Halton Region's three long-term care homes:
  - Allendale (Milton)
  - Creek Way (Burlington)
  - Post Inn (Oakville)
- 3. Complete the following:
  - Provide two written reference letters
  - Provide a current Police Check, only if 18 years or older (completed within the past 6 months)
  - Complete a 2-Step TBTest.
  - Get a flu shot (if volunteering between the months of November-April)
  - Provide proof of full COVID-19 vaccination
  - For further information, please visit halton.ca or dial 311.

Volunteer Application Form: Section one - To be completed by all applicants

voidifice: Application	romi. Section one - To be completed by an applicants
Name	
Address	
Home phone	
Work phone	
Cell	
Emergency Contact Name/Number/Relationship	
What volunteer experience do you	have?
What work experience do you have	; <del>}</del>
Languages spoken	

When are you able to volunteer?

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Morning							
Afternoon							
Evening							

### Section two - To be completed by all applicants

#### Two-step Tuberculosis (TB) test

You must bring a copy of a current (within the last six months) two-step TB test prior to starting your volunteer placement.

Any person working directly with residents or are in areas where residents congregate will be required to have a two-step TB test regardless of age.

#### **Covid-19 Vaccination**

You must bring a copy of your full COVID 19 vaccine status to the Life Enrichment Supervisor prior to starting your volunteer placement.

Proof of your full COVID-19 vaccine administration for your first and second dose that has been approved by Health Canada.

While you are volunteering, you must comply with onsite active screening when you enter the home, which includes mandatory universal masking. The home will provide you with a surgical/procedural mask, which must be worn at all times while volunteering.

If you are planning to volunteer between the months of December and June, you will require a seasonal flu shot and must provide a flu shot record. Halton provides flu shots to volunteers before flu season or you can make an appointment with your doctor.

### Section three – To be completed by applicants 18 years or older

#### **Police Security Check**

You must bring a copy of a current Police Security Check prior to starting your volunteer placement.

Any person working with vulnerable people (children, older adults, disabled persons, or in positions of trust) will be required to have a Police Security Check at age 18 or older.

Personal information on this application form is collected pursuant to the Municipal Act, 2001, S.O. 2001, c. 25, and will be used to assess your eligibility as a volunteer employee for Halton Region's Services for Seniors' Program. Questions regarding the collection of your personal information can be addressed to the Freedom of Information and Privacy Coordinator, 1151 Bronte Road, Oakville, ON L6M3L1, 1-866-442-5866.

### Section four – To be completed by all applicants

#### **Reference letters**

You must provide copies of two reference letters prior to starting your volunteer placement.

### Section five - To be completed by all applicants

I understand that if I am accepted as a volunteer, I will be expected to volunteer on the dates/times for which I am scheduled, and that I will inform my supervisor in advance if I am unable to attend. If I do not show up for my volunteer placement without calling my supervisor on three separate occasions, I may be terminated from my role. I further understand that volunteering is a commitment which I will do my best to fulfill in order to support and assist the clients/residents with whom I will beworking.

Signed:	Date:				
Section six - To be com	pleted by applicants 16 years of age or younger				
Please note: the minimum a	ge requirement to become a volunteer is 14 years of age.				
l <u>,</u>	being the parent/guardian of				
, , ,	him/her to undertake this volunteer opportunity with the Halton Long-term care home: itment and that the applicant is expected to attend on the dates and times specified by the				
Signed:	Date:				
	completed by all applicants  eer program - Waiver and Acknowledgement for Volunteers				
I,wherein I will occupy the position	acknowledge that I will provide services on a volunteer basis on of and perform only the duties as assigned by my supervisor.				
	the duties assigned by my supervisor, I will not perform in any supervisory capacity nor ment for which I have not been trained or that comes within the purview of a union contra				
•	aid for the services I provide, nor will I be entitled to any benefits normally provided by at this is not a contract of employment. I will be responsible for my own health insurance.				
_	Halton Region, its councillors, employees and agents from and against all claims and image or injury sustained by myself arising by reason of my provision of these services.				
Signature of applicant:	Date:				
Signature of parent/guardian: _ (if volunteer is under 18 years)	Date:				

We are grateful for your interest in volunteering. It will make a big difference to the lives of our residents and clients.

For more information, please contact:
Halton Region
Address: 1151 Bronte Road, Oakville

Website: halton.ca

Phone: Dial 311 or 905-825-6000
Toll Free: 1-866-442-5866 (1-866-4HALTON)
TTY: 905-827-9833, Fax: 905-825-9010

Email: accesshalton@halton.ca



<sup>\*</sup>Please note that your responses are voluntary and will be confidential. Responses will not be identified by individual. All responses will be compiled together and analyzed as a group.





