



Cedar Lake Lodge

3301 Jericho Rd.
LaGrange, KY 40031
(502) 222-7157
(502) 222-7150 FAX
www.cedarlake.org

Volunteer Service Application

THANK YOU so much for your interest in volunteering at Cedar Lake! We know that you will bring much to the Residents and they will also have much to give to you.

PERSONAL INFORMATION

Name: _____ Maiden/AKA: _____
 Soc. Sec # _____ *Sex: _____ *Race _____ *Date of Birth: _____
 Present Address: _____ City: _____ State _____ Zip _____
 Previous Address: _____ City: _____ State _____ Zip _____
 Home Phone: _____ Mobile Phone: _____
 E-Mail Address: _____
 Are you currently 18 years of age or over? Yes No
 Current Employer: _____
 May we call you at work? Yes No Work Phone: _____
 * Optional but disclosure helps to expedite background reports.

How did you hear about Cedar Lake Lodge volunteer program? _____

When are you available to volunteer?: Days Evenings/Nights Weekends

PREVIOUS VOLUNTEER EXPERIENCE

Hobbies, Skills and Special Interests: _____

PERSON TO CONTACT IN CASE OF EMERGENCY

Name: _____ Relationship: _____
 Daytime Phone: _____ Evening Phone: _____

DISCLOSURE AND CONSENT TO PROCURE BACKGROUND REPORTS

I understand that investigative background inquiries are to be made on me, which may include criminal convictions, motor vehicles, abuse records and other reports. Further I understand that you will be requesting information from various Federal, State and other agencies which maintain these records.

I authorize without reservation, any party or agency contacted to furnish the above mentioned information and release all parties involved from any liability and responsibility for doing so. I hereby consent to obtaining the above information and this authorization and consent shall be valid in original, fax or copy form.

Signature _____ Date: _____

PLEDGE OF CONFIDENTIALITY:

I hereby pledge that I shall safeguard and treat as confidential all information (whether acquired through verbal communication, written record, or observation) pertaining to any client, relative or friend of any resident or client, staff member, or volunteers of Cedar Lake, which I may through my affiliation with the agency, so acquire.

I HAVE READ AND UNDERSTAND THE FOREGOING PLEDGE OF CONFIDENTIALITY

Signature: _____ Date: _____

PLEASE NOTE:
Your assistance in providing all requested information and consenting to the necessary background checks will help to assure a safe and positive experience for you, our residents and staff. Thanks for your understanding and cooperation!!!