



UPMC | University of Pittsburgh Medical Center

VOLUNTEER APPLICATION

Date of Application: _____

PERSONAL INFORMATION (Please print)

Last name	First name	Middle Initial	
Present address	City	State	ZIP Code
Permanent address (if different)	City	State	ZIP Code
Home Phone	Cell Phone	E-mail address	
Occupation		If necessary, may we phone you at work? Phone: _____	

VOLUNTEER TYPE: Adult College Student Middle/High School Student Extern/Intern

DATE OF BIRTH (year optional) _____

LICENSE PLATE NUMBER/STATE (If parking in facility lot): _____

EMERGENCY CONTACT INFORMATION

Person to notify	Home phone	Work phone
Primary care physician	Phone number	

LANGUAGES: (read, write, speak, or sign) _____

HOBBIES/INTERESTS/SKILLS: _____

Are you currently a student? _____ If yes, where? _____

Address: _____

Present grade/level: _____ Anticipated graduation date: _____

Major: _____

WORK & VOLUNTEER EXPERIENCE

Current or Previous Employer (if applicable)	Previous/current volunteer experience:
Date(s) of employment:	Date(s) of volunteer service:
Responsibilities:	Responsibilities:

VOLUNTEER WORK PREFERENCE

Type of Work Preferred

Prefer to Work

- with patients
- with visitors
- with staff/volunteers

Day(s) and time(s) you would like to volunteer _____

Why are you interested in volunteering? _____

How did you find out about our program? _____

Referred by: _____

Do you require any physical accommodations that should be considered when selecting a volunteer assignment? If yes, please explain. _____

Have you applied for volunteer service to fulfill a school community service requirement? ___ Yes ___ No

Have you applied for volunteer service to fulfill a court-appointed community service requirement?

___ Yes ___ No

If yes to either question, please explain _____

Hours Required: _____ In what field? _____

Have you ever pleaded guilty, been convicted of, accepted ARD or a similar program, or pleaded no contest to any violation other than a summary offense? ___ Yes ___ No

If yes, describe in full _____

Are you a U.S. Citizen? ___ Yes

___ No, Visa and Passport documentation to be provided during interview appointment.

I certify that all statements made by me on this application are true and complete to the best of my knowledge. I understand that any false statement, misrepresentation or omission may cause my dismissal from volunteer service.

Signature _____ Date _____

Name (Printed) _____

UPMC is an equal opportunity employer. Policy prohibits discrimination of harassment on the basis of race, color, religion, national origin, ancestry, sex, age, marital status, familial status, sexual orientation, disability, or veteran status. Further, UPMC will continue to support and promote equal employment opportunity, human dignity, and racial, ethnic, and cultural diversity. This policy applies to admissions, employment, and access to and treatment in UPMC programs and activities. This is a commitment made by UPMC in accordance with federal, state, and/or local regulations

UPMC

Please mail or fax the completed volunteer application to the UPMC facility of your choice.

Volunteer and Community Services

UPMC Montefiore/UPMC Presbyterian

Kaufmann Building, Suite 1210
3471 Fifth Avenue
Pittsburgh, PA 15213
Fax: 412-648-6871

Volunteer Services

UPMC Bedford Memorial

10455 Lincoln Highway
Everett, PA 15537
Fax: 814-623-3537

Volunteer Services

Children's Hospital of Pittsburgh of UPMC

4401 Penn Avenue, Floor 1
Pittsburgh, PA 15224
Fax: 412-692-8468

Volunteer Services and Community Education

UPMC Horizon

110 N. Main Street
Greenville, PA 16125
Fax: 724-983-7939

Community Outreach

UPMC McKeesport

1500 Fifth Avenue
McKeesport, PA 15132
412-664-6784

Volunteer Services

UPMC Mercy

1400 Locust Street, Room 2196-D
Pittsburgh, PA 15219
Fax: 412-232-5568

Volunteer Services

UPMC Passavant

9100 Babcock Boulevard
Pittsburgh, PA 15237
Fax: 412-358-3399

Volunteer Services

UPMC Northwest/Sugar Creek Station

100 Fairfield Drive
Seneca, PA 16346
Fax: 814-676-7166

Volunteer Services

UPMC St. Margaret

815 Freeport Road
Pittsburgh, PA 15215
Fax: 412-784-4373

Volunteer Services

UPMC Senior Communities

709 Russellton Road
Cheswick, PA 15024
Fax: 412-784-5088

Volunteer and Community Services

UPMC Shadyside

5230 Centre Avenue
Pittsburgh, PA 15232
Fax: 412-623-6260

Volunteer Services

UPMC Living-At-Home Program

1370 Beulah Road, Fourth Floor
Pittsburgh, PA 15235
412-473-6677

Volunteer Services

Magee-Womens Hospital of UPMC

300 Halket Street
Pittsburgh, PA 15213
412-641-5497

Volunteer and Community Services

Hillman Cancer Center

William M. Cooper Pavilion
5115 Centre Ave., Ground Fl., Suite AG40.3
Pittsburgh, PA 15232
Fax: 412-623-4646

Student and Volunteer Services

Western Psychiatric Institute and Clinic

3811 O'Hara Street
Pittsburgh, PA 15213
Fax: 412-246-5205