



# ADS VOLUNTEER APPLICATION

Thank you for your interest in volunteering with Alzheimer's Day Services! Please fill out this application by hand, sign and mail or deliver to:

Volunteer Program  
Alzheimer's Day Services of Memphis, Inc.  
3185 Hickory Hill Rd.  
Memphis, TN 38115  
Fax: 901-370-5642

We hope to work with you soon! Any questions? Please contact us at **901-372-4585** or [reception@alzheimersdayservices.org](mailto:reception@alzheimersdayservices.org). Thank you for your support!

Some of the personal benefits for volunteering include:

- Receiving training and education on Alzheimer's disease and related dementia and the care given to those affected
- An opportunity for personal and professional growth
- Developing friendships that improve the quality of life of a person with dementia
- Gaining a sense of achievement and the feeling of giving back to your community

## PERSONAL INFORMATION

Name: \_\_\_\_\_ Preferred name: \_\_\_\_\_

Date of birth: \_\_\_/\_\_\_/\_\_\_ Sex: \_\_\_ Male \_\_\_ Female Phone: ( ) \_\_\_ - \_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

Emergency contact: \_\_\_\_\_  
Name Phone

Email: \_\_\_\_\_

## BACKGROUND

High school attended: \_\_\_\_\_  
Name City State Zip Code

Highest grade completed: \_\_\_\_\_ Diploma earned? \_\_\_ Yes \_\_\_ No Graduation year: \_\_\_\_\_

College attended: \_\_\_\_\_  
Name City State Zip Code

Years attended: \_\_\_\_\_ Degree earned: \_\_\_\_\_ Graduation year: \_\_\_\_\_

Other school attended: \_\_\_\_\_

Name

City

State

Zip Code

Years attended: \_\_\_\_\_ Degree earned: \_\_\_\_\_ Graduation year: \_\_\_\_\_

**Describe your experience with victims of Alzheimer's disease and victims' families:**

**Describe your experience with senior citizens:**

**List any special skills or talents:**

**Describe any past volunteer experience:**

## **INTERESTS**

**Why would you like to volunteer with us?**

**In what capacity would you like to volunteer?** \_\_\_ Ongoing \_\_\_ One-time (if so, please explain):

**At what time and on which days would you like to volunteer?**

\_\_\_\_\_ Monday \_\_\_\_\_ Tuesday \_\_\_\_\_ Wednesday \_\_\_\_\_ Thursday \_\_\_\_\_ Friday

**What is this volunteer work for?** \_\_\_ Community service \_\_\_ School credit \_\_\_ Internship \_\_\_ Personal

**At which location would you prefer to volunteer?** \_\_\_ Dorothy's Place (Hickory Hill) \_\_\_ Grashot Center (inside Kennedy Park in Raleigh)

I release Alzheimer's Day Services to contact references and law enforcement agencies in the cities where I have worked or lived. I will reveal any criminal convictions in the interview process and state that on the volunteer application.

**Signature:** \_\_\_\_\_

**Name (please print):** \_\_\_\_\_

**Date:** \_\_\_\_\_