



# Bassett Healthcare Network

## Bassett Volunteer Request Form

Department or Program: \_\_\_\_\_ Bassett Location: \_\_\_\_\_

Department Supervisor who will be responsible for the volunteer(s): \_\_\_\_\_

Phone number: \_\_\_\_\_ How many volunteer hours would you like per week? \_\_\_\_\_

Please describe your program/department in terms a volunteer will understand:

Describe the duties the volunteer would do, as specifically as possible:

**Example:** *Data entry and other computer tasks, visiting with patients, cleaning waiting room and refreshing magazine supplies, researching online materials, running errands within the building of placement.*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Are there any skills or abilities desired or required (such as computers, communication skills, following directions)?

Please indicate the days and times you prefer. We will not assign a volunteer to any timeslot not indicated.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

Comments:

### Please Return Form To:

The Volunteer Services Office  
HR House on the Bassett Medical Center Campus  
1 Atwell Road, Cooperstown, NY 13326

**P:** (607) 547-3219 | **E:** kyle.leisner@bassett.org