



# 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

E: [BHNHR@bassett.org](mailto:BHNHR@bassett.org)