



SENIOR MEALS PROGRAM

Good Food.....Good Friends.....Good Times

Thank you for your interest in volunteering as a Meals on Wheels Delivery Person.

Volunteers are the heart of our program! Not only do volunteers bring nourishing meals to our homebound older neighbors, but they offer our participants a cheerful (though brief) visit and the security of knowing that someone will be checking on them regularly. For some of our participants, the Meals on Wheels Volunteer is the only person they see each day.

For the safety of our vulnerable participants, prospective Meals on Wheels Delivery Volunteers must pass a Criminal History Check before they can be accepted into the program. This can take between 1 and 6 weeks to complete.

MEALS ON WHEELS VOLUNTEER DELIVERY PERSON APPLICATION PROCESS

1. Complete a Volunteer Application and an interview with the Site Coordinator.
2. Accompany a current volunteer on a Meals on Wheels route to “preview the job” and decide if this is the kind of volunteer work you desire.
3. Bring your Driver’s License to the Site Coordinator and pick up the envelope containing the Criminal History Form 301.
4. (Prospective volunteers who have been outside the state more than 60 consecutive days in the past three years will also be required to pick up a fingerprint card and take it to the appropriate location for fingerprinting. See list on following page.)
5. The Site Coordinator may not assist you with the form or see the contents of the form. If you have questions about completing the form, call the Criminal Records Specialist at Senior & Disabled Services: 541-682-4348.
6. Return the completed Criminal History Form 301 (and the fingerprint card if required) to the Site Coordinator in a sealed envelope. Be sure to complete and sign page 2.



7. The process for completing the Criminal History Check can take between 1-6 weeks.

8. The Site Coordinator will contact you when you have been approved for placement and you can return to register as a Meals on Wheels Delivery Volunteer and begin your orientation and scheduling.

If you have been outside the state more than 60 days in a row during the past three years, the Site Coordinator will give you the application, an envelope **and** a fingerprint card to take to the following for fingerprinting:

- **In Eugene/Springfield/Creswell/Veneta –**
Go to Lane County Sherriff's office in the Public Service Bldg. - 125 East 8th Ave. Eugene. Park on Oak between 7th and 8th go into side door on Oak Street level. Room 140. M-F, 8 am to 5 pm. \$10 fee, cash or check. *The volunteer is responsible for paying the fee.*
- **Florence –** Police Dept on Tuesdays for no charge. (Florence Justice Center, 900 Greenwood.)
- **Oakridge -** Police Dept from 2 pm-4 pm on Thursdays, \$8.00 cash.
- **Cottage Grove -** Police Dept, free for Cottage Grove residents or those employed in Cottage Grove. Bring the card with you. (corner of Main and River Avenue – 400 East Main)
- **Creswell –** Must go to Lane County Sherriff's office.
- **Junction City -** Police Dept does it free 1st and 3rd Thursday from 9-11 for Junction City residents. Non- residents will be charged \$25.
- **Veneta –** Must go to Lane County Sherriff's office.
- **Springfield –** Coordinator will make appointment at Springfield Police Dept.
- Volunteers who must pay for their fingerprinting and have a question about the tax deductibility of this fee should ask a tax advisor.





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Form 07a

**VOLUNTEER APPLICATION for
Meals on Wheels and Senior Meals Program Dining Centers**

Volunteer Name: _____

Address: _____ City _____ State _____ Zip _____

Phone: (Day) _____ (Evening) _____

E-Mail Address: _____

Social Security Number: _____

Hours/Days Available: _____

Type of Volunteer Work Preferred:

Education: _____

Work Experience: Please list previous work and volunteer experience.

Please provide information about your most recent employer or volunteer position:

Employer Name: _____ Contact _____

Address: _____ City _____ State _____ Zip _____

Phone: _____

Why do you want to volunteer with this agency?

Do you speak any foreign languages? If so, which one(s)?

Please list hobbies or skills you wish to share in your volunteer position.

Please give the name of two personal references.

Name: _____ Relationship _____

Address: _____ Phone _____

Name: _____ Relationship _____

Address: _____ Phone _____

Are there any health limitations which would preclude you from being able to perform the activities connected to a volunteer position with this program?

Please explain.

If you are interested in delivering Meals on Wheels, please read and complete the following:

1. *Do you own, or have access to, a reliable vehicle?*
2. *Do you have a valid Oregon State driver's license?*
3. *Driver's License Number:* _____ *State:* _____
4. *Auto Insurance Company:* _____ *Auto Liability Limits:* _____
5. *Criminal History Checks are required for MOW delivery volunteers who will have unsupervised contact with vulnerable clients. The conviction of a crime (felony or misdemeanor) will not automatically disqualify a person from volunteering. Each situation will be considered individually. The relevant form will be provided after the interview. Completed forms are maintained in a confidential manner at Senior & Disabled Services. This process can take from 1-6 weeks.*

Please print out this form and mail to:

Senior Meals and Meals on Wheels

1015 Willamette Street

Eugene, OR 97401

or

e-mail to: sds@lcog.org