



P.O. Box DV 383,
 Devonshire DV BX
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 mow/accounts@logic.bm

Delivering nourishing meals to the household

VOLUNTEER APPLICATION FORM

We ask that all applicants fill in the information requested in blue. For anyone volunteering to deliver meals, it is required that we have a police record check carried out as you will (potentially) be in contact with clients who are vulnerable people. In order to facilitate this process, we would be grateful if you will complete the section in full.

NAME: _____
 First (or known by) Middle Last Maiden and/or Other

DATE OF BIRTH: _____ **COUNTRY OF BIRTH:** _____
 (DD/MM/YYYY)

ADDRESS: _____

PHONE: _____ **EMAIL:** _____
 (Work) (Home) (Cell)

I can volunteer on a regular basis on: Mondays Tuesdays Wednesdays Fridays

The following is designed to give you an idea of what is involved with each volunteer position. Please indicate in which area(s) you would be interested in helping:

<p>Delivery with Vehicle. Time commitment: 11:00 a.m. – 1:00 p.m. <i>Check that meals issued correspond to the meal count as specified in the route book. Check that clients with special meals have a label with their name affixed to the meal container. In your own vehicle, deliver meals to clients then return cooler, bags, etc., to MoW. On return to MoW, report to dispatcher any discrepancies, problems or concerns. Please furnish a copy of your Bermuda driving licence.</i></p>	<input type="checkbox"/>
<p>Delivery – no Vehicle. Time commitment: 11:00 a.m. – 1:00 p.m. <i>Assist a driver with meal count and delivery. (Due to the continued threat of COVID-19, and social distancing, this position is currently limited to assisting an individual you know and with whom you are both are comfortable sharing a confined space.)</i></p>	<input type="checkbox"/>
<p>Dispatch. Time commitment: 9:30 a.m. – 1:30 p.m. <i>Put ice blocks in coolers. Pack coolers with desserts and cold or frozen meals. Check those with special labels. Pack hot meals (and soups when applicable) in bags with hot blocks, again checking that specially labelled meals are in correct bags. Record any messages from, or concerns of, drivers on their return from delivery. Call any clients who were not seen or contacted when the meals were delivered. Liaise with staff and answer phones as needed.</i></p>	<input type="checkbox"/>

Kitchen – 8:00/8:30 – 11:30 a.m. <i>Work as part of a team, under the direction of the Operations Manager, to prepare, cook and portion meals according to the menu. Clean up after meal service as required.</i>	<input type="checkbox"/>
Pot Washing – 10:00 a.m. – 1:00 p.m. <i>Work in a team of three to wash, rinse, sanitise, dry and put away pots, pans utensils, etc., used in meal preparation. Clean, sanitise and put delivery route coolers and bags away when returned from meal delivery.</i>	<input type="checkbox"/>
Administrator – 9:00 a.m. – 1:30 p.m. <i>Assist in general administration as needed.</i>	<input type="checkbox"/>

COVID-19

In order to protect you and others at this time, we are asking that all volunteers please inform Meals on Wheels if they are travelling off Island, or if they have travelled off Island within the last two weeks, or have been in contact with anyone who has arrived on Island, or tested positive, within the last two weeks. Government-required negative COVID-19 test results must be attained before volunteering or returning to volunteer at Meals on Wheels.

Waivers:

Meals on Wheels cannot be held responsible for any accident or damage that may occur in regard to Motor or Personal Accident Insurance during the course of your duties. Volunteers should consult their own insurance provider if they are concerned about insurance claims/benefits.

While Meals on Wheels are taking precautions, all volunteers accept that with the current pandemic there may be risks attached to working with Meals on Wheels and delivering to clients. All volunteers work with Meals on Wheels at their own risk.

Acknowledgement:

I acknowledge that I have read, understand, and accept the Volunteer Guidelines for The Protection of Vulnerable Persons (on the MOW website or in hard copy).

I understand that by signing up to be a volunteer at Meals on Wheels I will be required to:

- Commit to volunteering one day a week for at least a period of time.
- Arrive at the designated time to work in a specified area.
- Notify the office as soon as possible if I am unable to make the designated time.
- Notify the office as soon as possible if I am unable to keep my volunteer commitment on any given day, or if I will be away for any period of time; in order to allow MoW time to find a fill-in volunteer.

Signed: _____
 (Volunteer)

Date: _____
 (DD/MM/YYYY)

Signed: _____
 (Volunteer Co-ordinator)

Date: _____
 (DD/MM/YYYY)