



**HOSPICE HOUSE**  
*& Support Care of Williamsburg*

4445 Powhatan Parkway, Williamsburg VA 23188 telephone: 757-253-1220 · fax: 757-253-2599 ·  
www.williamsburghospice.org

Staff Notes

**Volunteer Application**

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

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

In case of emergency, notify \_\_\_\_\_ Phone \_\_\_\_\_

**Why are you interested in volunteering for Hospice House & Support Care of Williamsburg (HHSCW)?**

**Describe why you would be a good candidate for volunteering at HHSCW. Please include any education, work experience or specific skill sets.**

All volunteers should be prepared to submit a written reference if asked; additionally, Patient and Family Support volunteers will be asked to consent to a State Background Check at the time of their training.

By signing my name below, I agree that the information provided is accurate. (Computer generated signature acceptable)

NAME

DATE

**Please return completed application to: Diane Schwarz – Volunteers and Operations Director**  
[dschwarz@williamsburghospice.org](mailto:dschwarz@williamsburghospice.org)

*Caring for people at the end of life, comforting the bereaved and empowering others to do the same*  
Community-supported since 1982 ♦ United Way partner agency ♦ Virginia Association of Hospices



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We are grateful for the support of all volunteers. Hospice House & Support Care of Williamsburg could not exist without the generous time and talent of so many volunteers. Thank you for your interest in supporting the organization and its mission.

**PLEASE CHECK ALL CATEGORIES OF INTEREST**

**Training and time commitments vary depending on area of support or project**

**Patient/Family Support:**

\_\_\_\_\_ Volunteers sit with a patients and families providing a caring presence with conversation or shared silence. Volunteers offer support to family members by providing respite time and responding to requests for information. Volunteers are scheduled for shifts at Hospice House and/or can be assigned to a hospice individual residing in their own home to provide companionship for the individual and respite for their family caregivers.

**Staff and Facility Support:**

\_\_\_\_\_ Telephone and Reception \_\_\_\_\_ Office Projects \_\_\_\_\_ General House Maintenance and Repairs  
\_\_\_\_\_ Gardens/Grounds Maintenance (planting, pruning, weeding, watering, etc.) \_\_\_\_\_ Bird Bath and Feeder Upkeep  
\_\_\_\_\_ Computer Projects - Data Entry or projects in Word, Excel, Power Point or Publisher  
\_\_\_\_\_ Shopping for groceries or house hold items (Volunteer will be reimbursed)

**Event Support:** - Volunteers assist with fundraising events, support groups and memorial and celebration programs

\_\_\_\_\_ Providing food for Programs. Support Groups and Events \_\_\_\_\_ Taking Photographs (using personal camera)  
\_\_\_\_\_ Ushers/Greeters \_\_\_\_\_ Set up, Serving and Clean-Up \_\_\_\_\_ Assisting with Parking/Traffic Control  
\_\_\_\_\_ Running Errands \_\_\_\_\_ Raffle Item Solicitation \_\_\_\_\_ Hike for Hospice House planning and implementation  
\_\_\_\_\_ Volunteer Appreciation Event planning and implementation

**Music Support:**

\_\_\_\_\_ Providing Music at Memorial Programs \_\_\_\_\_ Providing Music at Hospice House on Sunday afternoons  
If interested, please list the musical instrument you play \_\_\_\_\_

**Community Outreach Support:**

\_\_\_\_\_ Tours of the house and grounds \_\_\_\_\_ Presentations in the community

**Bereavement Support:**

\_\_\_\_\_ Flower Delivery \_\_\_\_\_ Follow-up Group \_\_\_\_\_ Walking and Social Group Leaders \_\_\_\_\_ Field Education

\*Note: Field Education is for approved students only.