Dartmouth-Hitchcock
MEDICAL CENTER

Volunteer Sevices
(603) 650-7056

REQUEST FOR VOLUNTEER HELP

If you prefer not to fill out this form, please feel free to call the Volunteer Services office directly to place a request for help and/or to meet with the Director.

Name (please print) _____ Phone or Beeper _____ Date _____

Department / program name _____ Location _____

Frequency of assignment:

one time ☐ daily ☐ weekly ☐ monthly ☐ quarterly ☐ other ☐

Preferred day(s) / time(s) _____

Description of help needed and tasks involved: _____

Special experience or skills needed: _____

Physical requirements: _____

Location of assignment: _____

Person(s) responsible for departmental orientation & training: _____

Note: For some types of help to be done in our work room (collating as an example), we may need to contact you for more detailed information.

Thank you for your request, we will try to find a volunteer who possesses the skills which you have identified. Sometimes, however, we are unable to fill requests due to the unavailability of a compatible volunteer.

Please keep in mind that, due to wage and employment laws, a volunteer can support portions of an employee's tasks, but cannot be used to replace an employee.

Once we find a volunteer and have screened them to assess their ability to meet your request, we will ask you to meet them. Once you accept a volunteer, we ask that you take responsibility to orient them to your department and provide ongoing support.

Thank you for your interest in DHMC Volunteer Services.