

Database Assigned ID _____

Cleanup Volunteers

Individual Volunteer Intake Form



Date: ___/___/___ Office working with them _____ Completed by: _____

Volunteer Name: _____
(First) (Last)

Address: _____
Address City St Zip

Birthdate ___/___/___ male female youth under 19 years youth release signed

Home Phone: (____) _____ work: (____) _____ Mobile:(____) _____

Email: _____

Arrival date ___/___/___ **Departure date** ___/___/___

Need housing? No Yes → from ___/___/___ to ___/___/___

Will pay for lodging? No Yes local lodging at _____

Need meals? No Yes

Need RV hookup? No Yes → Self-contained? Yes No

Do you need transportation to work site? No Yes

Previous disaster experience? No Yes (where) _____

Are you a member of Thrivent Financial for Lutherans? No Yes

Member of fraternal benefit organization? No Yes → _____

Emergency contact

Name _____ relationship _____

Phone (____) _____ Cell (____) _____

Health issues:

Date of last tetanus ___/___/___ need shot updated

Skills Survey

Food services

- Work on food wagon
- Preparation
- Cook
- Serve/clean up

Heavy Equipment

- CDL licensed
- Backhoe
- Bobcat/skid loader
- Bulldozer
- Heavy Truck driver
- Mechanic
- Farm Tractor/wagon

General labor

- Team Leader
- Board windows
- Child care provider
- Debris removal
- Lifting/removal capability
 - Less than 15 pounds
 - Less than 30 pounds
 - Appliances
 - Carpet
 - Furniture
- Tarp roof
- Temporary repairs
- Tree removal

Office - General

- Communications
 - 2 way radio operator
- Computer – advanced skills
- Computer Data entry
- Damage Assessment
- Hospitality
- Intake – Client
- Intake - Volunteer
- Job Assignment Coordinator
- Job Inspector
- Operations Coordinator
- Orientation
- Receptionist
- Transportation coordinator
- Transportation – driver

Professional Skills

- Clergy
- Contractor
- Counselor
- Crisis Counselor
- Electrician
- Engineer of _____
- Lay Minister
- Medical Doctor
- Nurse
 - LPN
 - RN
- Parish
- Plumber
- Stephen Minister
- Trained Disaster Worker**
 - First Aid
 - CERT trained
 - Homeland Security Clearance
 - Immediate Responder

Professional Licenses and where

Other skills not listed

- American Sign Language
- Interpreter for _____

Comments:

Participant Liability Release Form

Please read before signing.

I, _____, acknowledge and state the following: I have chosen to travel and perform clean-up work from the flooding.

I understand that this work entails a risk of physical injury and often involves hard physical labor, heavy lifting and other strenuous activity, and that some activities may take place other than on ground level. I certify that I am in good health and physically able to perform this type of work.

I understand that I am engaging in this project at my own risk. I assume all risk and responsibility as well as related costs and expenses for any damage or injury to my property or any personal injury, which I may sustain while involved in this project.

I understand the need for confidentiality and will not discuss, photograph or otherwise disclose identifying information about the occupants of the house I am working in without prior permission from the volunteer coordinator and the family. This includes any reference to names, addresses, or other identifiable information.

By my signature, for myself, my estate, and my heirs, I release, discharge, indemnify and forever hold Lutheran Social Services of South Dakota, together with their officers, agents, servants, volunteers and employees, harmless from any and all causes of action arising from my participation in this project, including travel or lodging associated therewith, or any damages which may be caused by their own negligence.

Signature of volunteer

Date