



Volunteer Job Description

Volunteer Position: Job Squad Volunteer

Responsible to: *Housing Coordinator-* Natasha Boddy
VISTA Supervisor- Elizabeth Roscano

Purpose of Job: To enable older adults to live independently and safely in their homes as long as possible. To provide the expertise and labor as appropriate for minor home repairs to registered older adult homeowners.

Description:

- Receive calls from Housing Coordinator
- Schedule service appointment with senior homeowner
- Complete requested home repair service
- Report back to Housing Coordinator when service is completed

Qualifications/Skills Needed:

- Knowledge of minor home maintenance
- Sensitivity to the needs of older adults and understanding of older adults who are sometimes confused, forgetful and physically handicapped

Screening Requirements- Willing to complete and pass criminal record check

Benefits Offered:

- Opportunity to serve and support older adults
- Supplemental volunteer insurance

Training (includes volunteer manual):

- Attend general orientation session
- Specific training on procedures and Job Squad program
- Explanation of SGSM's volunteer insurance coverage
- Sensitivity to older adults

Length of Commitment: One year or as desired

Location: Report to homes within South Grand Senior Ministry parish boundaries.

Days and Times: Varies according to need and volunteer's schedule (at most once a month for a maximum of 4 hours)

Confidentiality Statement:

South Grand Senior Ministry volunteers are expected to keep information about individual people served by SGSM confidential from those outside SGSM and to share it internally only with staff also concerned with that individual.

I affirm that I have read and understand the job description and I am willing and able to comply with the demands of the job described.

Volunteer Signature:

Date

VISTA Supervisor Signature:

Date



VOLUNTEER GUIDELINES
SOUTH GRAND JOB SQUAD
2000 S. 11th St.
St. Louis, MO 63104
(314) 664-9700

In keeping with our mission to offer needed services that are planned, administered, and delivered by and for our seniors, we have developed a cost-free outreach program providing home maintenance services. Our purpose is to promote healthy and safe independent living environments for our seniors.

These guidelines are written to help you and the homeowner clarify in advance roles and responsibilities as well as answer frequently asked questions.

1. A two week time frame from the time that you are matched with the homeowner to job completion is given. If you are unable to complete the service in that time span, please refrain from accepting that job.
2. Once you have been matched with a homeowner, the coordinator will contact you. The coordinator will inform you of the requested service at this time. Upon the acceptance of the job, the coordinator will contact the homeowner informing him or her of your name and to expect to be contacted shortly by you. Please contact the homeowner as soon as possible so that a project date can be established.
3. Be sure to discuss with the homeowner what materials and supplies will be needed to perform the job. If the homeowner is homebound or unable to obtain the materials or supplies, the coordinator will inform you of this prior to your acceptance of the job. In this case, the volunteer will obtain the needed supplies and materials for the job and will be reimbursed by the homeowner. Prior to purchase, please inform the homeowner of estimated cost of supplies and materials. Please keep all receipts of transactions.
4. Please be sure to call your homeowner 3 days before project date to confirm your arrival time, location, and supplies needed. A reminder call to the homeowner the night before the scheduled project date may be helpful as well.
5. When you arrive at the home, be sure to wear your South City Job Squad name tag.
6. The volunteer will provide the needed expertise to perform pre-approved home maintenance services.
7. We understand that SGSM carries accidental insurance for all South City Job Squad volunteers.
8. We have instructed the homeowner to be present during the entire duration of the service.
9. A home visit by the coordinator is required for each homeowner prior matching a volunteer to his or her request. During this visit, the coordinator will review the guidelines and assist the homeowner with filling out the Registration Form and Permission and Release Form. These documents are kept on file at the SGSM office for future visits.
10. We ask that you make a 4 hour time commitment for each project. If more time is anticipated related to the project, the coordinator will discuss this with you in advance.

11. Enjoy your homeowner and his or her story. Don't put unnecessary stress on yourself. Your assignment is a privilege and a blessing to your client and yourself. Be prepared and enjoy.
12. Keep your prearranged time for service open. If due to illness or emergency you cannot perform the service, please let the coordinator know as soon as possible.
13. For the protection of those served, we require all Job Squad volunteers to show proof of a valid I.D. and we complete a St.Louis Police record check.
14. The South City Job Squad program is only intended for minor home maintenance services. We do not perform major repairs or maintenance of homes. Rather, a referral will be made to other servicing agencies.
15. Refrain from performing any other services that were not specified before the project date. If there are additional services requested on the project date that are not on the job list, please ask the homeowner to reschedule with the coordinator.
16. If you find upon arrival at the home that the job is either too dangerous or too large to perform, refrain from servicing the homeowner and contact the coordinator. You have the right to refuse to perform the service.
17. Once the task is completed, please contact the coordinator to confirm and inquire any helpful information or concerns you may have. Please report any hazardous living conditions or concerns for well-being at this time.
18. We strongly recommend that a Job Squad volunteer not give a homeowner his or her home phone number. Instead, tell the homeowner to call the SGSM housing coordinator for any questions and future needs.



Job Squad Volunteer Registration

Primary Title: ___ Mr. ___ Mrs. ___ Miss ___ Ms. Registration Date: _____

Last Name First Name Middle Initial Parish Affiliation

Address Apt. #

City State Zip Code Date of Birth

Contact Information

Home #: _____ Cell #: _____

Work #: _____ E-mail: _____

Emergency Contact

Name: _____

Phone Number:

Relationship: _____

Home: _____

Work: _____

Helpful Information

Do you have any allergies to any pets that would disable you to perform a job? If so, please list below.

Are you bi-lingual? If so, list other language. _____

Please mark the areas of health and safety tasks and home maintenance that you'd be willing to volunteer.

- Gutter repair/cleaning
- Awning repair or removal
- Minor concrete repair (patches)
- Interior hand rail repair or replacement
- Replacement of light switches and plugs
- Furniture moving or removal
- Fence repair
- Carpet repair
- Patch hole in the wall
- Minor Plumbing (Fix leaky faucet, minor toilet repair, replace toilet seat)
- Change accessible furnace filters
- Maintain or install window air conditioner
- Replace smoke detector batteries
- Change light bulbs
- Affix numbers on the house
- Weatherization (install plastic around windows, store lawn furniture)
- Heavy or seasonal housekeeping
- Yard work
- Washing windows
- Home assessments (register homeowners)
- Other _____

Background Check Authorization

Print Name: _____
(First) (Middle) (Last)

Phone Number: _____

Birth Date: _____

Social Security Number: _____

The information contained in this application is correct to the best of my knowledge. I hereby authorize **SGSM Network** and its designated agents and representatives to conduct a comprehensive review of my background causing a consumer report and/or an investigative consumer report to be generated for employment and/or volunteer purposes. I understand that the scope of the consumer report/ investigative consumer report may include, but is not limited to the following areas: verification of social security number; current and previous residences; employment history, education background, character references; drug testing, civil and criminal history records from any criminal justice agency in any or all federal, state, county jurisdictions; driving records, birth records, and any other public records.

I further authorize any individual, company, firm, corporation, or public agency (including the Social Security Administration and law enforcement agencies) to divulge any and all information, verbal or written, pertaining to me, to **SGSM Network** or its agents. I further authorize the complete release of any records or data pertaining to me which the individual, company, firm, corporation, or public agency may have, to include information or data received from other sources.

I hereby release **SGSM Network**, the Social Security Administration, and its agents, officials, representative, or assigned agencies, including officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind, which may, at any time, result to me, my heirs, family, or associates because of compliance with this authorization and request to release.

Signature: _____ Date: _____