

**Rembrandt Court Offices**  
1 Madras Street  
Oaklands Park SA 5046

**Home Care Hub**  
21 Greenfields Drive  
Greenfields SA 5107

T: (08) 8198 0300  
F: (08) 8296 3699

info@rembrandtliving.org.au  
www.rembrandtliving.org.au



## Volunteer Application Form

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

Date of Birth: \_\_\_\_\_

Contact number (Ph): \_\_\_\_\_ (m) \_\_\_\_\_

Updated Police Check: Y or N: Date Due \_\_\_\_\_

Emergency contact name & number: \_\_\_\_\_

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

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

How did you hear about Rembrandt Living?

\_\_\_\_\_  
\_\_\_\_\_

Why would you like to Volunteer at Rembrandt Living?

\_\_\_\_\_  
\_\_\_\_\_

The Days and time you would like to volunteer?:

| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|--------|---------|-----------|----------|--------|----------|--------|
| AM     | AM      | AM        | AM       | AM     | AM       | AM     |
| PM     | PM      | PM        | PM       | PM     | PM       | PM     |

**What would you like to get out of your experience as a volunteer at Rembrandt Living?:**

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**What would you like to be involved in when you volunteer:?**

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|---|---|--------------------|--|
| <b>Individual with men or women</b>         | <b>Gardening</b>                                    | <b>Cards games</b> | <b>Men's shed</b>  |
| <b>Group</b>                                | <b>Board Games</b>                                  | <b>Shopping</b>    | <b>Knitting group</b>  |
| <b>Beauty Therapy</b>                       | <b>Word Games</b>                                   | <b>Bus outing</b>  | <b>Arts and Craft</b>  |
| <b>Bingo</b>                                | <b>Reading- Poetry club</b>                         | <b>Cooking</b>     | <b>Movies</b>  |
| <b>Exercisers</b>                           | <b>Playing the Piano or other music instruments</b> | <b>Computer</b>    | <b>Specialised groups<br/>Bible Study<br/>Photography club</b> |
| <b>Friendly visits out in the community</b> | <b>Uit en Thuis</b>                                 | <b>Pet Therapy</b> | <b>Other?</b>  |

**Would you like to work on your own or a group**

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**Working in Aged Care is a lot fun and you bring joy to many people but at times it can be very stressful and extremely emotional for Volunteers. Below are some questions**

that we would like you to fill out. These questions will help us get to know you and how we can better support you in your role as a volunteer at Parkview!

What are your past working experiences?

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Have you volunteered before, if yes in what area?

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Have you volunteered in Aged care before and volunteered with dementia residents?

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Some of our residents have advanced dementia and cannot communicate, how do you feel about visiting this residents and spending time with them?

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Volunteer Co-ordinator Sign: \_\_\_\_\_

Volunteer sign: \_\_\_\_\_

Date: \_\_\_\_\_

Ruth Farley - Volunteer Coordinator