



PENNSYLVANIA VETERANS HOMES VOLUNTEER APPLICATION SOUTHWESTERN VETERANS' CENTER

The Department of Military and Veterans Affairs-Bureau of Veterans Homes extends a thank you for your interest in applying as a Volunteer at our Veterans Homes/Centers.

Volunteers are subject to proper personal-protective-equipment (PPE) as needed, such as a mask or respirator. In addition, you will be subject to COVID-19 testing when needed.

Below is the general process when submitting your application.

After you have applied and a position is available, you will be notified for an opportunity to interview.

The Process:

1. Submit volunteer application packet to include the application, background check, and current PPD Test.
2. Schedule a volunteer orientation onsite to include a tour of the facility.
3. Schedule additional trainings as needed for different volunteer opportunities.

Depending on the training needed, since there are several different volunteer opportunities, a group may train together.

Copies of the background-check and other applicant documents may be returned to the applicant as applicable.



**PENNSYLVANIA VETERANS HOMES
VOLUNTEER APPLICATION
SOUTHWESTERN VETERANS' CENTER**

Name:

Address:

Phone Numbers: Home Work Cell Phone

E-mail Address:

Preferred Method of Contact (Please check method below)

Phone Home Work Cell

Mail E-mail

Emergency First and Last Name Relationship Phone Number
Contact:

Organization affiliations(s), if
any:

Special experience, training, or
skills, if any:

Do you have any criminal convictions (other than parking violations)?

Yes No

If yes, please
explain:



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**Do you require any special accommodation to perform the duties as a Volunteer?
If yes, please explain special or physical limitations and accommodations needed.**

Volunteer Availability

Please check the days you are available and time range in the tables below.

**Days: (check (√) Monday Tuesday Wednesday Thursday Friday Saturday Sunday
or select all that apply)**

*(For Hours Available - Below list start-time & end time under each day of availability i.e, 8AM-2PM or 3PM to 7PM, etc.)
Remember to indicate AM and or PM)*

Hours Available:

List Character References (other than relatives)

First and Last Name	Reference-Type (i.e., co-worker, pastor, friend, etc.)	Phone Number
1.		
2.		
3.		

To the best of my knowledge, the information provided is true and complete. Furthermore, I hereby waive all claims to monetary gratuities or gifts for services rendered as a volunteer.

Volunteer Signature

Date



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If the volunteer is a youth (under 18) parental approval is required. Please enter youth's name below.

Youth's First and Last Name

Date

Parent/Guardian Signature

Date

PLEASE RETURN TO:

Southwestern Veterans' Center
ATTN: Volunteer Coordinator
7060 Highland Drive
Pittsburgh, PA 15206
Main Number: 412-665-6790~Fax: 412-665-6799

Email: MV, SWVCVolunteerApp

BELOW - OFFICE USE ONLY

Date Received:

References

Medical

Interview

Orientation