



UPMC- MYCS Volunteer/Externship Application Form

Please complete this application form if you are interested in becoming a MYCS Student/Volunteer. Once you complete the form, please save this form and email to bossetk@upmc.edu

Contact Information

First Name

Last Name

Middle Name

Title: Choose

Street 1:

Street 2:

City:

State:

Zip

Home Phone:

Work Phone:

Cell Phone:

E-mail

Demographic Information

You may optionally provide the following information. It is used only to help us get a better idea of the demographic make-up of our student/volunteers.

Type: Choose

Gender:

Date of Birth: Month

Day

Year

Highest Level Of Education
Achieved:

Criminal Violation (see below)

Ethnicity: Choose

Computer Data Entry

Knitting

Musician

Sewing

Gardening

Photography

Availability

Select Facility, Days of availability, enter start and end times and months available

Preferred Facility:

Adult Outpatient

Children's Outpatient

ATIS (Drug and Alcohol)

Psychiatric & Social Rehabilitation

Vocational

Residential

Days

Sunday

Monday

Tuesday

Wednesday

Thursday

Friday

Start Time:

End Time

From Month

Day

Year

To Month

Day

Year

Type of Student/Volunteer Work Preferred

List the types of work you prefer and indicate if you would like a position with patient contact.

Emergency Contact

In the event of an emergency whom should we notify? - Please list two contacts.

Physician's Name

Physician's Phone:

Contact 1

First Name

Last Name

Home Phone

Cell Phone

Relationship

Contact 2

First Name

Last Name

Home Phone

Work Phone

Relationship

Work & Student/Volunteer Experience

Employer Name

Please list your most recent employer or student/volunteer experience, if applicable

Reason for Student/Volunteering

Referral Source

Why are you interested in student/volunteering?

Community Service

Have you applied for student/volunteer service to fulfill a school or court appointed community service requirement?
If yes, please include explanation along with the number of hours required

Violations

This information is REQUIRED: Have you ever pleaded guilty, been convicted of, accepted ARD or similar program, or pleaded no contest other than a summary offense? Please indicate Yes or No. If yes, please describe.

Citizenship

This information is REQUIRED: Are you a U.S. Citizen? Please indicate Yes or No. If you are not a citizen, Visa and/or Passport documentation are required at your interview appointment.

I Agree

I understand and agree that submitting this application form does not automatically register me as a UPMC-MYCS Student/Volunteer and Community Services Student/Volunteer, and that there may be certain qualifications I must meet, including the acceptance of established Student/Volunteer policies and procedures before I may begin student/volunteering

By submitting this form I attest that the information I have provided on the form is true and complete to the best of my knowledge. I understand that any false statement, misrepresentation or omission may cause my dismissal from Volunteer Service

I Agree