



## THE KINGS WAY *LIFECARE ALLIANCE*

---

Giving Purpose and Meaning to Every Life

Dear Volunteer Applicant:

Thank you for your interest in becoming a volunteer with Kings Way LifeCare Alliance. We welcome caring, reliable people who are willing to give of their time and energy to assist us in fulfilling the Kings Way Mission of creating a vibrant and stimulating community for our residents. We are pleased that you are willing to assist Kings Way Volunteer Services in providing valuable assistance to both residents and staff.

Attached are volunteer application forms and an outline of the various volunteer opportunities at Kings Way LifeCare Alliance.

Please return the enclosed application form with two letters of reference from persons (not a relative) who would be willing to comment on your strengths and weaknesses.

Upon receipt of the completed application form and the letters of reference, you will be scheduled for an interview with a representative of our Volunteer Services. Available openings in the volunteer program will be discussed at that time. Following receipt of all documentation, notification of acceptance into our volunteer program will be given.

We look forward to hearing from you.

Kind regards,

Carol Kent  
Community Events Coordinator  
8 Squire Dr., Quispamsis, NB, E2E 4Z4  
[event@kwcc.ca](mailto:event@kwcc.ca)  
506-847-1131; ext.2340

Dorothy Martin  
Director of Activities/Volunteer  
Kennebec Manor  
475 Woodward Avenue  
Saint John, N.B. E2K 4N1  
506-632-9628, ext. 109  
[Dorothy.martin@kennebecmanor.ca](mailto:Dorothy.martin@kennebecmanor.ca)



# THE KINGS WAY *LIFECARE ALLIANCE*

Giving Purpose and Meaning to Every Life

## ADULT VOLUNTEER APPLICATION FORM

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

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

E-Mail: \_\_\_\_\_

Phone: (H): \_\_\_\_\_ (W): \_\_\_\_\_ (Cell): \_\_\_\_\_

Name & phone of person to contact in case of emergency:

\_\_\_\_\_

Previous Relevant Experience:

A) As a volunteer: \_\_\_\_\_

B) Work: \_\_\_\_\_

C) Hobbies: \_\_\_\_\_

Why do you wish to become a volunteer? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Would you like to volunteer at Kings Way Care Centre **or** Kennebec Manor?

\_\_\_\_\_

Areas in which you would like to volunteer (see attached list of potential opportunities):

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please indicate days and times you would be available to volunteer.

---



---

**Please enclose (2) letters of Reference from persons other than family, documenting here their current address and phone numbers.**

Name of Reference: \_\_\_\_\_

Mailing Address:

---

Phone #:

---

Name of Reference: \_\_\_\_\_

Mailing Address:

---

Phone #:

---

**Volunteer Commitment:** I am interested in volunteering with Kings Way LifeCare Alliance. I agree to respect KWLCA policies and to abide by KWLCA rules regarding dress and decorum, conducting myself quietly and with consideration for the feelings and conditions of residents; to co-operate willingly with staff and other volunteers: to follow instruction carefully and promptly; to carry out only those duties assigned to me, to treat as confidential any information that comes to my attention while on duty. If unable to come to volunteer, I will notify Volunteer Services or the person to whom I report for duty as much in advance as possible. **Also,** I give my permission to Volunteer Services to contact my references to complete a reference check.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

## Kings Way LifeCare Volunteer Activities

**Assist with activities:** escort residents to meals or events; or assist with activities; such as, games, crafts, exercise class, cooking, etc.

**Assist with music:** volunteers with musical talents help provide music for sing-along, church services, or weekly entertainment.

**Assist with meals:** volunteers with extra training assist residents with their food and utensils.

**Care Clowns:** volunteers with specialized training use principles of therapeutic humour.

**Hair Care:** assist in the Hair Care Salon by escorting residents to and from the salon, making appointments, and assisting the hair stylist as needed.

**Country Store Cart:** stock and deliver small items residents wish to purchase.

**Library:** organize library collection and deliver books to residents.

**Gardening Club:** assist in care of plants, plus various gardening projects.

**Art Club:** assist residents who love to draw and paint.

**Newsletter Club:** assist with developing and producing a monthly newsletter.

**Transportation Aide:** escort residents to appointments.

**Visiting friend:** visit lonely residents to provide friendship, read to them, walk with them, or just sit quietly in their presence.

**Pastoral Care:** volunteers with extra training assist in providing spiritual care to selected residents by reading Scripture, praying, assisting with church services, etc.

**Palliative Care:** volunteers with specialized training in end-of-life issues spend time with, and offer support to, palliative care residents and their families.

**Special projects:** volunteers may be asked to help with special activities as they arise.