



Cascadia Behavioral Healthcare, Attn: VIEWS
10373 NE Hancock, Suite 200 | Portland, OR 97220
503-261-6181
views@cascadiabhc.org
<http://cascadiabhc.org/views/>

VOLUNTEER APPLICATION

All information on this application is considered confidential. You will be called so we may schedule an interview after your application has been reviewed.

Volunteers Involved for the Emotional Well-Being of Seniors

Date: _____

Name: _____

Date of Birth: _____ Phone: _____

Email Address: _____

Street Address: _____ City: _____

Mailing Address (if different): _____

City: _____ Zip: _____

Which position(s) are you interested in applying for?

Weekly Support Group Facilitator

Conversation on Aging Facilitator



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1. How did you hear about the VIEWS program?
2. Why are you interested in participating in the program?
3. How did/do you feel about your own aging? Explain briefly.
4. Have you had experience with aging parents, grandparents, older adults or issues of aging? Explain briefly.
5. What qualities do you have that you think would help you to become a good counselor/facilitator?
6. Describe any experience you have had with counseling, facilitating or working with groups?



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7. Describe some of your other skills and special interests.
8. VIEWS has worksites in Multnomah and Clackamas Counties. What do you use for transportation? Do you have any areas you prefer, or that you cannot reach?
9. Describe some of your previous employment or volunteer activities:
(begin with most recent)
- A. _____ E. _____
B. _____ F. _____
C. _____ G. _____
D. _____ H. _____
10. List any education including vocational or college, and major training and continuing education:
- A. _____ E. _____
B. _____ F. _____
C. _____ G. _____
D. _____ H. _____



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15. VIEWS asks for a 12-month commitment to chosen volunteer activities and requires attendance at our monthly education and support meetings (10am – noon on the second Monday of each month) as long as the volunteer is active. Do you see any obstacle to making or honoring such a commitment?
16. Please provide any additional information or comments you'd like, here.

Email to: viewsmultnomah@gmail.com

Or mail to: VIEWS Program Manager
Cascadia Behavioral Healthcare
10373 NE Hancock, Suite 200
Portland, OR 97220

If you have any questions, please call:

Views Program Manager at 503-261-6181