



BRAIN INJURY SERVICES OF SWVA PALS VOLUNTEER APPLICATION

Personal Information:

Name _____
 First **middle** **last** **“nickname”**

Address _____

Phone (W) _____
(H) _____
(C) _____

Email _____
Fax _____

Birthday (optional): _____

The BEST days and time to reach you are _____

The BEST way to reach you is (please check one of the following):

- | | |
|------------------------------------|--------------------------------|
| <input type="checkbox"/> Phone (H) | <input type="checkbox"/> Email |
| <input type="checkbox"/> Phone (W) | <input type="checkbox"/> Fax |
| <input type="checkbox"/> Phone (C) | |

Briefly describe why you are interested in becoming a PAL and what you would like to gain from this experience.

What is your full-time occupation: _____.

Is your schedule predictable on a weekly basis? Y ___ N ___

The time commitment of being a PALS Volunteer consists of a weekly phone or email exchange with your PAL and a once a month in person activity. Considering your schedule, do you feel that you can make that time commitment to your PAL? _____

Have you ever volunteered before? _____

If so, where? _____
_____.

Match Information:

Please describe yourself in three words:

- 1) _____
- 2) _____
- 3) _____

Please check the activities that you most enjoy:

- Watch movies
- Play sports
- Play cards
- Watch TV
- Watch sports
- Assemble a puzzle
- Listen to music
- Take walks
- Write letters
- Talk on phone
- Arts/Crafts
- Fix cars
- Computer games
- Internet
- Play instruments
- Travel
- Spend time with family
- Dance
- Cook
- Sew
- Garden
- Fish
- Sing
- Email
- Shop
- Read
- Scrap booking
- Photography

□ Other: _____

Please list specific examples of activities that you enjoy. For example, you enjoy watching college basketball or grow tomatoes every year.

Are you willing to transport your PAL? Y ___ N ___
If yes, please provide a copy of your auto insurance card.

Do you smoke? Y ___ N ___

Is there anything else you would like to have us consider when pairing you with a PAL? _____

Applicant Signature

Date