



Cancer Resource Center of Western Maine
199 Main St.
PO Box 263
Norway, ME 04268

Volunteer Services Guide

Thank you for your interest in becoming a volunteer. As a volunteer we ask you to be familiar with our Vision and Mission Statements, they are stated below.

VISION

We are a healthy community involved in providing, sharing and receiving resources and services that enhance life for individuals and their loved ones facing the challenges of Cancer.

MISSION

We embrace anyone affected by Cancer in a community that offers hope and caring through support, education and concepts in healthy living.

Please complete the attached application and return it to Sherri Otterson at PO Box 263, Norway, ME 04268. Candidates will be interviewed to determine areas of volunteer interests. Volunteers are needed in the following:

Center Volunteers:

- Supervise drop in hours at the Center
- Computer skills
- Assist with mailings, phone calls, etc.
- Caring Card Stamping – create cards, notes for cancer patients
- Light cleaning
- Help set up for classes
- Workshop proctor – open center and assist with program
- Knitting/ crocheting circle
- Conversation
- Play games – cribbage, cards, etc.
- Assist with library
- Group facilitator

Teachers or Leaders:

The center offers programs to its clients. Do you have a skill or knowledge that you would like to share? Stamping, exercise, meditation, Yoga, fly tying, knitting, etc.

Community Education:

Help us get the word out about the programs:

- Distribute poster and brochures out in the community (Relay for Life, Sidewalk Art Show, DECA craft fair, etc.) and places like physician offices.
- Assist the director with putting together the monthly program list and calendars, help produce newsletter.
- Write news releases
- Develop a newsletter

Other Ways to Volunteer:

- Serve on the Board of Directors
- Join knitters or sewers group making chemo caps, pouches, pillows, etc. for patients during treatment
- Photographer
- Be a committee member

Other Opportunities Shared with Other Organizations:

- Maine Buddy Program – This program of the Cancer Community Center of South Portland is for people living with, caring for, or who have lost someone to cancer. Participants are matched with a trained volunteer Buddy who has had similar experiences through phone conversations.
- Reach to Recovery - This program of the American Cancer Society helps breast cancer patients cope with their breast cancer experience. Trained volunteers are available to give you support and up-to-date information.
- Road to Recovery – This American Cancer Society program provides transportation to and from treatment for people who have cancer but do not have a ride or are unable to drive themselves. Volunteer drivers donate their time and the use of their cars so that patients may receive the life-saving treatment they need.



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of
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Volunteer Application

Name _____

Address _____

Email _____

Date _____

Phone (day) _____ Phone (evening) _____

Cell _____

Date of Birth: _____

Former/Current Occupation _____

Employer _____

Education (#of years completed) _____

Degree(s) _____

Are you at least 16 years old? Yes _____ No _____

What school do you attend

Have you been convicted of a felony in the last 7 years?

Yes _____ no _____

Do you have any volunteer experience?

Do you have any physical or health restrictions that might affect you
volunteering?

How did you find out about the CRC of Western Maine volunteer
opportunities?

Do you have any special talents or job skills

Have you, a member of your family or a close friend been diagnosed with cancer in the past year? yes _____ no _____
more than a year ago? yes _____ no _____

If comfortable, please tell us about this experience:

Please tell us why volunteering at CRC of Western Maine is of interest to you.

What volunteer position are you interested in?

I am available for volunteer training (check all that apply)

_____ morning _____ afternoon _____ evening _____

In case of emergency, contact:

Name _____

Phone _____

Is there anything else you would like to tell us?

Please provide us with the names, addresses, phone numbers of two references from employers, past volunteering, church, school (not relatives)

Name _____

Phone (day) _____ (eve) _____

Address _____

Name _____

Phone (day) _____ (eve) _____

Address _____

I certify that the information on this volunteer application is correct.

Signature of Applicant _____

Date _____