



**MIDDLEBOROUGH AREA
MEDICAL RESERVE CORPS
20 Centre Street
Middleborough, Massachusetts 02346
(508) 946-2408 Fax (508) 946-2321**

Name: (last) _____ (first) _____ Date _____

Mailing Address _____

Hm# _____ Cell# _____ E-Mail _____

Employer: _____ wk# _____

Education _____

Volunteer Experience (past & present) _____

Veteran _____ Other Languages spoken _____

Please check areas of interest for Volunteering:

- | | |
|------------------------------|-----------------------------------|
| _____ Medical (see reverse) | _____ Nursing __RN __LPN __other |
| _____ Shelter Management | _____ Greeters |
| _____ Food Preparation | _____ Maintenance |
| _____ Computer | _____ Assisting with Applications |
| _____ Child Care (CORI/SORI) | _____ Counseling |
| _____ Record Keeping/filing | _____ Drivers/transportation |
| _____ Special Population | |

Red Cross Trained _____ CPR Trained _____ Other _____

IF YOU ARE SPECIALIZED IN THE MEDICAL FIELD, PLEASE EXPLAIN:

PLEASE FEEL FREE TO TELL US MORE ABOUT YOURSELF(ADDITIONAL INFORMATION THAT IS NOT INCLUDED ON THE APPLICATION). THE PLYMOUTH AREA MEDICAL RESERVE CORP IS LOOKING FOR PEOPLE OF ALL AGES AND BACKGROUNDS. IN THE EVENT OF A BIOTERRORIST EVENT OR AN INFECTIOUS DISEASE OUTBREAK IT IS IMPORTANT THAT ANYONE ABLE TO VOLUNTEER IS INCLUDED IN THE PLAN.

THE PLYMOUTH AREA MEDICAL RESERVE CORP WOULD LIKE TO THANK EVERYONE IN ADVANCE WHO VOLUNTEERS FOR THIS IMPORTANT TASK.

PLEASE MAIL OR RETURN YOUR APPLICATION WHEN COMPLETED TO

MIDDLEBOROUGH AREA MEDICAL RESERVE CORP
20 CENTRE STREET
MIDDLEBOROUGH, MA 02346
PHONE 508-946-2408

E-MAIL:
jstn@middleborough.com

This application does not constitute a contract for employment. If you should decide not to participate please do not return this application. If you should change your mind after registering, please let us know.