



## 2025 CHKD Junior Volunteer Program Guidelines for Junior Volunteers

### **PROGRAM REQUIREMENTS – PLEASE READ CAREFULLY**

Review all materials and program requirements in this packet with a parent/legal guardian. **To participate in this program, you must:**

- Ensure that your vacation plans, work schedules, camps, or school activities do not interfere with the scheduled volunteer dates.
- Be a high school student, minimum 15 years of age and older and still enrolled in high school (**student must be 15 on or before June 1, 2025 ~ no exceptions**). Note: Students are eligible to participate in the program the summer after graduation.
- Have at least a C grade average.
- Commit to one **full** 2-week session, Monday – Thursday. Any absences from the session must be for an approved reason (illness, funeral, etc.). Absences for vacation, camp, sports practice, etc., are NOT excused and may result in loss of “returning junior volunteer status” for the following year. Attendance issues will affect the volunteer’s eligibility to reapply.
- Follow the step-by-step instructions to submit the online application. After completing this process, **CHECK YOUR EMAIL FOR ADDITIONAL DIRECTIONS**. If you do not see the email, check your Spam or Junk Mail folder then enable the message as a trusted site.
  - After you review the program requirements, forms, and complete the online application, you or a parent must contact our office at 757-668-7195 to schedule a personal interview.
  - Parents/Legal Guardians: Please obtain a copy of your child’s immunization records. It must include documentation of two MMR (measles, mumps, and rubella) and two Varicella (chickenpox) vaccinations or MMRV combined vaccinations. If your child had a history of chickenpox disease, please provide documentation. Students must bring the immunization records to the interview; otherwise, they will not receive an assignment until records have been received.
  - If accepted into the program, there is a requirement to submit a TB skin test (PPD).

### **INTERVIEW PROCESS**

**Southside: Chesapeake, Norfolk, Portsmouth, Suffolk, Virginia Beach, Hampton, Newport News**

Interviews for students on the southside are conducted in-person at the main hospital in small groups, and interviews last approximately 45 minutes. They take place at the main hospital at 601 Children’s Lane in Norfolk. Parents/guardians may drop their children off in the front roundabout, but students who are driving and parents/guardians coming into the hospital must park in Visitor Garage A. The garage entrance is across the street from the hospital, and you will enter from Wagner Street (short street behind Central Baptist Church). You will receive a parking ticket and must bring the ticket to the Volunteer office for validation. There are a limited number of free handicapped parking spaces available in front of the hospital. Check-in with security then proceed to the Volunteer Services office on the 2<sup>nd</sup> floor. Parents may wait in the main lobby until

completion of the interview. There is also the Grand Grounds coffee shop and KD café on the first floor for your enjoyment.

#### Lightfoot/Williamsburg:

Interviews for students in the Lightfoot/Williamsburg area will be conducted virtually in small groups and will last approximately 45 minutes. Students will need to submit their completed paperwork prior to the interview by fax at 757-668-8907 or scan/email to [Volunteer.Services@chkd.org](mailto:Volunteer.Services@chkd.org).

Students who arrive **late** for the interview will have to reschedule. Students who are missing any of the required paperwork **will not receive an assignment until the forms have been submitted.**

There are volunteer opportunities at the main hospital and offsite locations. We attempt to place students in their preferred area of interest; however, placement is based upon available positions and at the discretion of the Volunteer Services staff. While some areas provide an opportunity to work directly with patients, the **majority of assignments strictly involve office-based work duties.**

#### ITEMS TO BRING TO THE INTERVIEW:

- **Permission Form:** Signed by the parent/legal guardian ensuring transportation to and from the assigned location.
- **Volunteer Commitment:** Signed by both parent/legal guardian and student.
- **Session Request Form:** Completed with your desired session and preferred time.
- **Teacher/Counselor Recommendation Form (if available at the time of interview):** Completed and signed by a teacher or counselor. Students must ensure it is completed and submitted. The form can be placed in a sealed envelope and given to the (*students are not permitted to open the envelope*). The recommendation can also be scanned and emailed to [Volunteer.Services@chkd.org](mailto:Volunteer.Services@chkd.org) or faxed to 757-668-8907. If the form is not available during the interview, it will be due in the Volunteer Services office on or before **April 18**.
- **Immunization Records (Review the records with the physician's office if necessary):**
  - 2 MMR immunizations (measles, mumps & rubella)
  - 2 Varicella immunizations (chicken pox)
  - Or combined MMRV
- **Cash for uniform shirt: \$10.00**

#### **TUBERCULOSIS (TB/PPD) SKIN TEST (DO NOT OBTAIN THE TB SKIN TEST UNTIL YOU RECEIVE NOTIFICATION OF YOUR ACCEPTANCE INTO THE PROGRAM):**

Upon acceptance, junior volunteers must provide a negative TB/PPD skin test result administered with a date of May 2024 or thereafter. More information will be provided during the interview; therefore, please do not obtain a skin test prior to confirmation of your acceptance into the program. Test results must be submitted to our office on or before **May 16**. **Results submitted after the due date will not be accepted.**

In lieu of the TB skin test, Volunteer Services can also accept a blood test (known as a quantiferon, blood assay or t-spot) or a chest x-ray report in the past 3 years if one has been performed.

## **JUNIOR VOLUNTEER ORIENTATION**

Junior volunteers accepted into the program must complete a mandatory online orientation module. Participants will receive an email with the instructions on **May 1**, and the deadline for completion must be on or before **May 16**. Failure to complete this orientation will result in removal from the program.

Junior volunteers assigned to a patient care area, i.e. Child Life will need to complete an additional online module. Specific details will be provided to applicable volunteers.

## **UNIFORM**

- Red CHKD junior volunteer t-shirt must be worn at all times.
- Full-length casual khaki or black pants or scrub pants (no capris, shorts, yoga pants, exercise apparel, leggings, or denim pants).
- Comfortable closed-toe shoes, such as tennis shoes. Sandals, clogs and flip-flops are not allowed due to safety reasons and infection control protocols.
- CHKD issued badge.
- Juniors who do not adhere to the uniform requirements will not be allowed to volunteer.
- ***NOTE: Juniors assigned to Child Life are not permitted to wear artificial nails or nail polish of any kind. Juniors must also avoid wearing fragrances, large/excessive jewelry, and certain facial piercings (requirements will be addressed during Child Life training).***

## **TRANSPORTATION**

Junior volunteers should not be dropped off more than 30 minutes before their assignment, and they must be picked up no later than 30 minutes after the conclusion of their assignment.

## **PARKING**

- Parents/guardians may drop-off and pickup volunteers assigned to the main hospital at the roundabout located on the frontside of the building. Junior volunteers who will be driving must park in Visitor Garage A across the street from the hospital (the garage entrance is located on Wagner Street behind Central Baptist Church). Bring the parking ticket to the Volunteer Services office each day of your session for validation.
- Junior volunteers assigned to offsite locations will receive specific instructions for parking.

## **PROGRAM COMMUNICATION**

All communication about the program, deadlines, directions, etc. are sent via email, so be sure to check the email account documented on your application (check your "Spam" folder if necessary). It is the junior volunteer's responsibility to check their email on a regular basis and review all correspondence. If you have additional questions, contact the Volunteer Services office at 757-668-7195 or email at [Volunteer.Services@chkd.org](mailto:Volunteer.Services@chkd.org).



# Children's Hospital of The King's Daughters

## CHKD Junior Volunteer Program

### Permission Form & Photo Consent

*To be completed and signed by the parent or legal guardian.*

I, \_\_\_\_\_ give permission for my child, \_\_\_\_\_  
(Parent/Guardian's name, please print)

to volunteer at Children's Hospital of The King's Daughters or one of its affiliated sites.

*Please review and initial each statement:*

- \_\_\_\_\_ I will ensure my child's transportation to and from the assigned location. I understand that my child cannot arrive at the hospital more than 30 minutes prior to the assigned shift and must be picked up promptly at the end of the shift.
- \_\_\_\_\_ I understand that my child is expected to complete the FULL session unless there is an excused reason (illness, funeral, etc.). I will notify the office prior to the shift if my child will be absent.
- \_\_\_\_\_ I understand that vacations, camps, sports practices, etc., are not excused absences and may result in my child being ineligible to return the following year.
- \_\_\_\_\_ I understand that my child is not allowed to leave their assigned location during the scheduled shift.
- \_\_\_\_\_ I understand that only a portion of junior volunteer roles involve patient contact, but majority of the roles only involve office work.
- \_\_\_\_\_ I understand that my child must complete the mandatory orientation on or before the deadline to participate in the program.

#### Parent/Legal Guardian Information (Please print legibly):

Name: \_\_\_\_\_ Relationship to Volunteer: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home#: \_\_\_\_\_ Cell#: \_\_\_\_\_ Work#: \_\_\_\_\_

Parent/Guardian's Email: \_\_\_\_\_ Junior's Email: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Relationship to Volunteer: \_\_\_\_\_

Please list any allergies to food, latex, medications or other substances. If none, please write N/A.

\_\_\_\_\_

#### PHOTO CONSENT:

As a participant in the CHKD Junior Volunteer program, your child's photo may appear in CHKD publications and/or social networking sites. Photos may also include groups of volunteers who are not individually identified.

**Please initial only ONE of the options:**

☐ I give permission for my child's name to be connected with their photograph in CHKD publications and/or social networking sites.

☐ I do not give permission for my child's name to be connected with their photograph in CHKD publications and/or social networking sites.

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date



## CHKD Junior Volunteer Commitment

Volunteering requires a commitment of time and resources by both the volunteer and the organization receiving the volunteer service. CHKD invests staff time and other resources to screen and train appropriate volunteers. Please read the following statement of expectation and sign as an indication of acceptance and understanding of the terms:

- Junior volunteers are required to volunteer every day of their session (Monday – Thursday).
- Volunteers are responsible for communicating all absences by calling 668-7195 or emailing a volunteer staff member prior to start of shift. Messages must include junior's name and reason for absence. Excused absences include illness, family emergency, etc. Vacation plans or scheduling conflicts are not excused.
- Volunteers who meet the attendance requirement for their session and obtain a positive staff evaluation are eligible to be a "returner" volunteer for the next summer and will receive their paperwork one month prior to general public.
- Junior volunteers with unexcused absences may potentially lose their "returner" status and be required to reapply the following year with the general public as a new volunteer.
- Junior volunteers are responsible for adhering to the standard uniform (official program shirt, full-length casual khaki or black pants or scrub pants – no denim, capris, shorts, exercise apparel, leggings, or yoga pants), closed toe shoes, i.e. tennis shoes, and CHKD issued badge. Volunteers dressed inappropriately will be sent home—no exceptions.
- Junior volunteers will remain in their assigned area unless the Volunteer Services staff approves and secures a new assignment.

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Junior Volunteer Signature

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Date

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Parent Signature

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Date



## 2025 Junior Volunteer Summer Program

### Children's Hospital of The King's Daughters

### WELCOME!

Please check your desired session and indicate if you can volunteer during a different session:

Volunteers report Monday – Thursday only (NO Fridays, wknds, or holidays)

\_\_\_\_\_ Session 1: June 16 – June 26  
 \_\_\_\_\_ Session 2: June 30 – July 10  
 \_\_\_\_\_ Session 3: July 14 – July 24  
 \_\_\_\_\_ Session 4: July 28 – August 7

Please check your preferred shift:

\_\_\_\_\_ 9:00 am – 12:00 pm  
 \_\_\_\_\_ 1:00 pm – 4:00 pm  
 \_\_\_\_\_ Either shift would work

DO NOT WRITE IN THIS BOX.  
For Office Use Only:

Session: \_\_\_\_\_

AM                  PM                  OFFSITE

Dept(s): \_\_\_\_\_

DO NOT WRITE IN THIS BOX.

Name \_\_\_\_\_

Jr. Volunteer's Phone#: \_\_\_\_\_

**Jr. Volunteer's Email – MUST BE INCLUDED:** \_\_\_\_\_

**\*\*Check the box if you will graduate from high school this year:** ☐

Area(s) of Interest (if applicable):

1<sup>st</sup> Choice \_\_\_\_\_ 2<sup>nd</sup> Choice \_\_\_\_\_

**Preferred Location(s):** Please indicate your preferred location as well as if you have flexibility to serve at another location. Select all that apply.

Main hospital \_\_\_\_\_  
 Other Norfolk Locations \_\_\_\_\_  
 Chesapeake \_\_\_\_\_  
 Suffolk \_\_\_\_\_  
 Virginia Beach \_\_\_\_\_  
 Peninsula – Hampton \_\_\_\_\_  
 Peninsula – Newport News \_\_\_\_\_  
 Peninsula – Wmbg/Lightfoot \_\_\_\_\_

**Example:**

Main hospital \_\_\_\_\_ 1<sup>st</sup>  
 Other Norfolk Locations \_\_\_\_\_ 2<sup>nd</sup>  
 Chesapeake \_\_\_\_\_  
 Virginia Beach \_\_\_\_\_ 3<sup>rd</sup>  
 Peninsula – Hampton \_\_\_\_\_  
 Peninsula – Newport News \_\_\_\_\_

**DISCLAIMER:** Junior volunteer placements will be made on a first come, first-served basis and at the discretion of the Volunteer Services staff; therefore, preferred departments/assignments cannot be guaranteed. There are roles that involve working with patients; however, MAJORITY of the assignments are strictly office-based, which means that volunteers will not have any direct contact with patients.

**\*\*I acknowledge that I have read the above disclaimer with full understanding: Check here** ☐

A list of potential department assignments is located on the back of this form.

## **Potential Volunteer Assignments**

**\*NOTE: Majority of assignments are strictly office-based.\***

**\*\*Assignment availability is subject to change.\*\***

### **Most common roles**

- Child Life – (involves patient contact) – only offered at the main hospital - Norfolk
- Gift Shop – only offered at the main hospital – Norfolk
- Office Assistant – various departments and locations
- Surgery Waiting Room – offered in Norfolk, Virginia Beach, and Newport News only

**\*\*Sports Medicine and Therapy Services\*\*** - Positions only available at select locations.

### **CHKD Practices & Facilities:**

#### **Chesapeake**

Health Center at Oakbrooke (500 Discovery Dr.)

#### **Hampton**

Hampton Roads Pediatrics (214 Foxhill Rd.)

#### **Newport News**

Health & Surgery Center at Oyster Point (11783 Rock Landing Dr.)

#### **Norfolk**

CHKD Main Hospital (601 Children's Ln.)

Children's Pavilion (401 Gresham Dr.)

#### **Virginia Beach**

Health & Surgery Center at Princess Anne (2021 Concert Dr.)

Health Center & Urgent Care at Loehmann's Plaza (3960 Virginia Beach Blvd.)

Health Center at Landstown (1924 Landstown Centre Way)

#### **Lightfoot/Williamsburg**

Health Center at Lightfoot (6425 Richmond Rd.)



# Children's Hospital of The King's Daughters

## Teacher/Counselor Recommendation for Junior Volunteer Program

**(FORM MUST BE COMPLETED & RETURNED TO OUR OFFICE BY FRIDAY, APRIL 18, 2025)**

School Name and Address: \_\_\_\_\_

Student's Name: \_\_\_\_\_ Grade Level \_\_\_\_\_

**CHKD Volunteer Services is recruiting students for the Junior Volunteer Summer Program who are responsible, dependable, and caring, who can provide high-quality service to patients, guests and staff. We ask for your assistance in evaluating the student in each category.**

Please circle the appropriate rating:

School Attendance	Excellent	Good	Average	Fair	Poor
Punctuality	Excellent	Good	Average	Fair	Poor
Conduct	Excellent	Good	Average	Fair	Poor
Dependability	Excellent	Good	Average	Fair	Poor
Follows Instructions	Excellent	Good	Average	Fair	Poor
Accepts Responsibility	Excellent	Good	Average	Fair	Poor
Shows Initiative	Excellent	Good	Average	Fair	Poor

Scholastic Average      ☐ 90-100      ☐ 80-90      ☐ 70-80

Do you recommend this student for the CHKD Junior Volunteer Program? ☐ Yes    ☐ No

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Teacher/Counselor Name & Position: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Business Telephone: \_\_\_\_\_ Ext: \_\_\_\_\_ Email: \_\_\_\_\_

You may submit the completed evaluation through one of the following methods:

- Give the evaluation to the student in a sealed envelope.
- Scan/Email: [Volunteer.Services@chkd.org](mailto:Volunteer.Services@chkd.org)
- Fax: 757-668-8907

Please contact Volunteer Services at 757-668-7195 with additional questions.

Thank you for taking the time to complete this recommendation.

*Health, Healing, and Hope for All Children*



## **2025 CHKD JUNIOR VOLUNTEER SUMMER PROGRAM**

### **IMPORTANT DATES TO REMEMBER**

All communications about the program, deadlines, directions, etc., are sent via email; therefore, be sure to check the email account you used in your online application on a regular basis (also check your “Spam” folder). It is the junior volunteer’s responsibility to read the program information and deadlines provided in these emails.

#### **General Online Orientation (all junior volunteers):**

An email with the online education will be sent on May 1, and the test must be completed on or before May 23.

#### **Teacher/Counselor Recommendation Form: *NEW JUNIORS ONLY***

Due on or before Friday, April 18

#### **TB (PPD) Skin Test Options: *NEW JUNIORS ONLY***

Due on or before Friday, May 16

- *This test involves 2-steps. The first step is placement of the PPD. The second step involves returning to your doctor’s office within 48-72hrs after placement to have it read; therefore, allow enough time to complete the entire process and submission to our office on or before the due date.*
- *The second option is submission of a blood test (also known as a quantiferon, blood assay, or t-spot).*
- *The third option is submission of a chest x-ray report within the last 3 years.*

#### **Child Life Online Orientation (only for volunteers assigned to this area):**

- **Session 1:** Email will be sent on Monday, May 26  
Completion deadline: On or before Friday, June 6
- **Session 2:** Email will be sent on Monday, June 9  
Completion deadline: On or before Friday, June 20
- **Session 3:** Email will be sent on Monday, June 23  
Completion deadline: On or before Saturday, July 5
- **Session 4:** Email will be sent on Monday, July 7  
Completion deadline: On or before Friday, July 18