

2. Case Worker Requesting *

3. Is there a specific volunteer you'd like to complete this task? *

4. Client Phone Number *

5. Client Name(s) or People Group *

6. Client's Language *

7. Age(s) of Client(s) Who Will Be Receiving Service *

Example: Can identify adults as "adult", but give specific age of child(ren)

8. Time of Service *

9. Does this require driving a vehicle? *

☒ Yes

☐ No

10. Is this an airport pickup? *

☐ Yes

☒ No

11. Pick Up Address *

8640 Spring Tree Lane #3204
Keller, TX 76244
(Watervue Apartments)

12. Drop Off Address *

John Peter Smith Hospital

13. How many total clients will be transported? *

Please include the total number of car seats & identify if they are infant/toddler

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14. Is this request for a specific date? *

Please enter date & time into the "other" section

☐ No

☒ 3/3/23 12:30 pm

15. How long will this task take from beginning to end? *

2 hours

16. If any, what materials will the client OR volunteer need? *

Please be specific, i.e.: if volunteer needs a file, where can they find it? If a client needs a document, where would it be located?

Appointment notice - will put on Serenity's desk. Client should bring travel document and medical documents with her and any medications she is currently on. I will communicate this to her.

17. Important information *

Please explain the problem/situation that the client needs assistance with, including if the volunteer is expected to stay with the client or just drop them off

Volunteer should go in with client at hospital to help her check in. Her appointment is on the 4th floor Otherwise, volunteer doesn't need to stay with client but should ensure phone number is left with clerk so they can pick up client when finished.