



**PATIENT & FAMILY ADVISORY COUNCIL (PFAC) COMMITTEE
APPLICATION AGREEMENT**

I verify that all of the information provided on this application is true, correct, and complete. I authorize investigation of all information and statements in this application. I release all persons, companies and agencies responding to such an investigation from liability for releasing information or confirming statements on this application. Falsification or omission of information shall be grounds for refusal to volunteer.

This application is not intended as a job offer or contract for any specific time period. As a volunteer for Guadalupe Regional Medical Center, I understand that I will not be reimbursed for my services. I understand that I may resign or be terminated by Guadalupe Regional Medical Center at any time without notice or requirement of cause.

Guadalupe Regional Medical Center conducts its operations with the highest degree of safety for patients, employees, and visitors. The Hospital prohibits the use, consumption, exchange, sale, possession or trade of controlled substances in the Hospital, in vehicles or while on Hospital business. Guadalupe Regional Medical Center requires that volunteers undergo appropriate screening as necessary to ensure that State and Federal Regulations governing hospital services are being met. Any screenings, including but not limited to Criminal History Checks, will not be performed with the candidate's consent. If the candidate declines the screening requirements, the candidate will not be considered for a volunteer role.

I understand and agree that submitting this application form does not automatically register me as a volunteer for Guadalupe Regional Medical Center, and that there may be certain qualifications I must meet, including the acceptance of established volunteer policies and procedures before I may begin volunteering.