



ALOMERE
HEALTH

It's better here.

111 17th Avenue East
Alexandria, MN 56308

The Functions of the Volunteer Chaplains:

The hospital chaplain will sensitively and prayerfully minister to each patient at the patient's point of need. The hospital chaplain does not function as a spokesperson of a particular religious denomination or body. The individual chaplain should respect the spiritual and religious diversity of the patients they serve. An individual chaplain will not impose his or her own convictions on the patient or seek to proselytize them to a particular church or denomination. This position involves being on-call 1-2 weeks (could change to 1 week a month, depending on the number of volunteer chaplains we have) to provide chaplain services to our patients who request a clergy visit, but are not affiliated with a church or we are unable to contact their affiliated church to make a visit. This can also include end-of-life services.

We usually have two chaplains on-call every week and it is currently on a 3-week rotation. We are unable to provide an amount of times you could potentially be contacted by us to make a visit, because it is dependent on our census and our success with contacting the patient's affiliation, if one.

Additional things to know:

- Alomere Health reserves the right to restrict, limit or terminate any individual participating in the volunteer chaplaincy program. Volunteer chaplains must conduct themselves in an appropriate, ethical, moral and legal manner, consistent with the Minnesota Patient Bill of Rights.
- When we send out the chaplain calendar for the month we do our best to update you on any visitor restrictions or change in masking policy.
- If on-boarded, we would have you meet with our Employee Health department to go over some basic items for on boarding.
- If on-boarded, we would also issue an Alomere Health badge that would need to be worn when visiting our patients.

Thank you. We look forward to hearing from you.



Chaplain Application

This form is for your use to express your intention to participate in the person-helping ministry.

I herein agree to serve as a Volunteer Chaplain at Alomere Health as per guidelines approved by the Hospital and Ministerial Association.

Please print your name as you wish it to appear on the photo ID badge you will wear.
(Contact Ashton Anderson, Human Resources, at 320-762-6080 to obtain your photo ID badge).

Chaplain Name: _____
Print Name

Chaplain Signature: _____

Name of Church Affiliation: _____

Church Address: _____

Church Phone: _____

Home Address: _____

Home Phone: _____ Cell Phone: _____

E-mail Address: _____

Date: _____

- Sign Confidentiality Statement (*from Clergy Program, Volunteer Policy - Sharon Weaver*)
- Employee Health Visit

Must abide by the current masking policies.

Name and Signature of an Official Person from Your Congregation:

_____ *Print Name* _____ *Signature*

Address: _____

Phone Number: _____

Chief Nursing Officer Signature: _____

Return this Form to:

Margaret Kalina
Chief Nursing Officer
Alomere Health
111 - 17th Avenue East
Alexandria MN 56308