

# Winchester Meals on Wheels

4 Socrates Way Winchester, MA, 01890

winchestermow@gmail.com (781) 516-1900

## New Driver Intake Form

Winchester Meals on Wheels delivers to clients once a day, approximately 930-1030AM, Monday to Friday. There are no meal deliveries on Public Holidays or school snow days. Each daily meal service is divided into set routes that take no longer than 1 hour. Meals are prepared by Winchester Hospital and dispatched to the volunteer drivers by the Meals Coordinator from the kitchen service entrance of the hospital (Valley Road, closest to Highland Ave.).

Volunteer drivers can sign up to deliver at a frequency that suits them. Drivers can run a fixed schedule (for example - every second Tuesday of the month) deemed "Regular Driver" or on a flexible basis to fill routes that are not already assigned, deemed "Substitute Driver".

All drivers must submit a Chapter 16 172C CORI Form and a photocopy of their Drivers License to The Jenks Center for approval prior to driving. In addition, we require proof of auto insurance sent to winchestermow@gmail.com.

Driver scheduling is communicated via email on a monthly basis so please input an operating email account as the primary means of contact.

## Volunteer Driver Information

Name: \_\_\_\_\_

Date Of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address (primary source of contact):

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Home Phone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

**Driver Availability:** (please circle):

## Regular

## Substitute

*If Regular, please continue with the question below so we can assign a suitable route and regular date that suits your schedule. Following approval of the submitted CORI form, every month your set driving route (as per your desired commitment) will be presented in the monthly Driver Schedule email for your confirmation.*

*If Substitute, following approval of the submitted CORI form, your name will be added to the monthly Driver Schedule email and we welcome your assistance with driving on any open spots.*

**Regular Driver Availability:** (for example: once a month/  
every 3rd Thursday/any day except Friday, etc.)

TOWN OF WINCHESTER



MIDDLESEX COUNTY, MASSACHUSETTS

Winchester Council on Aging  
(781)721-7136  
Fax# (781)721-0926

109 Skillings Road  
Winchester, MA 01890-2884

Winchester Council on Aging

GWINCA  
CH444

**Chapter 6 172C CORI Request Form**

The Winchester Council on Aging has been certified by the Criminal History Systems Board for access to all criminal offender record information on the following individual pursuant to Chapter 6 172C that mandates agencies which employ or accept as a volunteer or refer for employment any individual who will provide care, treatment, education, training, transportation, delivery of meals, instruction, counseling, supervision, recreation or other services in a home or in a community based setting for any elderly person or disabled person, or who will have any direct or indirect contact with such elderly or disabled persons or access to such person's files shall obtain all available CORI from the Criminal History Systems Board prior to employing such individual, accepting such individual as a volunteer or referring such individual for employment.

Applicant Information (Please Print)

_____	_____	_____
Last Name	First Name	Middle Name
____/____/____	____/____	
Date of Birth	Last 6 digits of Social Security #	

Please attach a photo copy of photographic identification

_____	_____
Applicant's Signature	Date

Requested by: \_\_\_\_\_  
Signature of Authorized Cori Employee