

**TITLE:** Dental Department Volunteer  
**Location(s):** 1520 Stockton Street  
**Projected Hours:** Flexible  
**Host Name** Dental Director/Dental Operations Manager

**SUMMARY OF VOLUNTEER POSITION:**

Under the supervision of the Dental Director/Dental Operations Manager, volunteers will learn about how dentists, dental assistants, and dental operations work in a Federally Qualified Health Center (FQHC), and they will be able to help with various functions not involved with direct patient care.

**ESSENTIAL FUNCTIONS:**

- Preparing dental care packages and distributing dental educational material to patients.
- Assisting with administrative duties, including office tasks, appointment reminder calls, and general clerical or technological support as needed.
- Assisting with disinfection treatment room preparation, including setting up treatment rooms after they have been disinfected by dental assistants and restocking as needed.
- Observing dental procedures and assisting in the sterilization room's clean area.
- Provide non-medical translation services for patients.
- Greet patients upon their arrival, answer any non-medical questions, and assist them in getting situated for their appointment.
- Uphold HIPAA guidelines and maintain confidentiality in all interactions.

**PREFERRED QUALIFICATIONS:**

- High school student or older.
- Anyone who has an interest in becoming a dentist, dental assistant, or learning more about the dental business.
- Competency in working with computers, telephones, and office equipment.
- Able to take responsibility for assigned tasks.

**LANGUAGE:**

- Fluent reading, writing, and speaking in English is required.
- Fluency in Cantonese and Mandarin is preferred, but not required.
- Fluency in any other language other than English is also preferred, but not required.

**This is a volunteer position.** I, the undersigned, acknowledge that I have read, understood, and accepted this position description and am able to perform these essential job functions without restrictions. I also understand that it may be modified from time to time.

\_\_\_\_\_  
Volunteer Print Name

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

*If the volunteer is under 18 years of age, please also have your parent/guardian sign below:*

\_\_\_\_\_  
Parent/Guardian Name

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Volunteer Coordinator Name

\_\_\_\_\_  
Volunteer Coordinator Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
NEMS Host Name

\_\_\_\_\_  
NEMS Host Title

\_\_\_\_\_  
NEMS Host Signature

\_\_\_\_\_  
Date