

Volunteer Application



Please fill out this application form completely. All information is held strictly **confidential**. Upon submission of your form we will contact you to discuss next steps. Please note: all required screening and training must take place prior to volunteering.

Personal Information

Full Name:

First

Last

Address:

Street Address

Apartment/Unit #

City

Prov.

Postal Code

Home Phone:

()

Alternate Phone:

()

E-mail:

May we contact you via?: Phone Email Mail (check all that apply)

May we leave a message?: No Yes

Occupation:

Employer:

Does your employer have a volunteer matching program? : No Yes

Education and/or Program of Study:

Emergency Contact:

Phone Number:

Relation:

Volunteer Preferences

How often would you like to volunteer? (check one)

Every 1-2 weeks _____ Once per month _____ Once every few months _____ Once or twice a year _____ Other _____

How long of a commitment would you like to make? (check one)

Less than 1 month _____ 1-3 months _____ 4-6 months _____ 7-10 months _____ 1 year _____ 1+ year _____ Other _____

What kind of availability do you have? (circle all that apply)

Daytime: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Evenings: Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Comments:

What volunteer areas are you interested in getting involved with? (check all that apply)

Events/Fundraising

Education/Outreach

Communications

Client Services Support

Comments:

For Office Use Only

Program/Level

**The answers to the following are required for funding purposes.
All information in this section will be matched to the ID Number only.**

ID Number: First 2 letters of first name: _____ First 2 letters of last name: _____

Birth Date: _____ **Gender:** Male Female
(month/day/year)

Aboriginal Identity (choose only one)

- First Nations Metis Inuit Non-status Bill C-31 status Not applicable

Population Group (choose only one)

- Caucasian Arab
 Chinese West Asian (e.g. Iranian, Afghan, etc.)
 South Asian (e.g. East Indian, Pakistani, Sri Lankan, etc.) Korean
 African/Caribbean Japanese
 Filipino Another Group _____
 Latin American Don't know
 Southeast Asian (e.g. Vietnamese, Cambodian, Malaysian, Laotian, etc.)

Language spoken most often at home (choose only one)

- English Hindi
 Punjabi Pashto
 Urdu Nuer
 Mandarin Spanish
 Chinese (unspecified) Tagalog
 Farsi Kurdish
 Arabic Polish

Other language or languages spoken most often at home that are not listed:

Were you born in Canada? No Yes

If not born in Canada, country of birth: _____

If not born in Canada, number of years in Canada: _____

What neighbourhood do you live in? _____

Marital Status: (choose only one)

- Married Divorced
 Living common-law Single, never married
 Widowed Other _____
 Separated

Number of adults (over 18 yrs) in household: _____

Number of children in household: _____

Ages of children in household: _____

