



Volunteer Application Form

Name: _____

Last

First

Middle Name

Home Address:

Street

Community

Postal Code

Telephone Number: _____

Home

Cell

E-Mail

Date of Birth: ____/____/____

day month year

Emergency Contact _____ Home # _____ Cell # _____

References: Two names with **addresses** and **telephone numbers**

(eg: friend, minister, previous volunteer supervisor, employer)

Name Address Phone # Relationship to you

Name Address Phone # Relationship to you

Special skills, training, interests or hobbies (crafts, music, languages spoken):

Days and hours you are **not available** for volunteer work:

Approximately how often would you be willing to volunteer? Weekly Bi-Weekly Monthly

Do you have a valid driver's license? Yes No PIC # if applicable _____

Do you have a car available to you for volunteer work? Yes No

Signature

Date

(This form must be accompanied by a completed declaration of confidentiality)