

COMMUNITY VOLUNTEER APPLICATION FORM

The information on this form is strictly confidential and is solely intended for the authorized use of CultureLink to determine your suitability to become a Community volunteer.

Please help us to determine how to make the best use of your skills as a volunteer by filling out the questionnaire below. Submit this **Application**, along with your **Resume** and **Cover Letter**, in person or by email to reception@culturelink.ca.

GENERAL INFORMATION

Today's date: _____

Last Name: _____ First Name: _____

CONTACT INFORMATION

Address: _____ Apt # _____

City: _____ Province: _____ Postal Code: _____

Cell Phone: _____ Home Phone: _____

Work Phone: _____ Email: _____

What best describes your current situation?

Employed Retired Student Seeking Work Other

EMERGENCY CONTACT INFORMATION (Name of person to be notified in case of Emergency)

Last Name: _____ First Name: _____

Phone: _____ Cell Phone: _____

DO YOU SPEAK ANY LANGUAGE(S) OTHER THAN ENGLISH?

Yes No If yes, please specify which one(s) _____

EDUCATION & EMPLOYMENT

Highest Education Level Completed University College High School Other

Name of Program: _____

Length of Program: _____

Other Skills or Training: _____

VOLUNTEERING PREFERENCES

Please mark the days and times of the week that you are available:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

PROGRAMS: POSITIONS IN WHICH YOU ARE INTERESTED (Please check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Administration/Reception (A) | <input type="checkbox"/> Children and Youth Programs |
| <input type="checkbox"/> Cycling Program (CP) | <input type="checkbox"/> Senior Program |
| <input type="checkbox"/> Employment Programs | <input type="checkbox"/> Settlement Programs |
| <input type="checkbox"/> Mentorship Programs | <input type="checkbox"/> Other |

REFERENCES

Please provide two references. At least one should be an employee/supervisor/teacher or an individual who is not related to you by family ties.

Last Name: _____ First Name: _____

Relation to applicant: _____ Phone #: _____

Email: _____

Last Name: _____ First Name: _____

Relation to applicant: _____ Phone #: _____

Email: _____

I hereby authorize CultureLink to obtain references from the above individuals in connection with my application for a volunteer position. I hereby authorize the above individuals to provide a reference in connection with my application for a volunteer position with CultureLink, and release them from any liability in regards to it. I hereby certify that all information included in this application form is true and complete.

Applicant's
Signature: _____

Checked by: _____