



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 in person or by email at crivera@culturelink.ca

1. 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): _____

2 EDUCATION & EMPLOYMENT

HIGHEST EDUCATION LEVEL COMPLETED University College High School

Other: _____

Name of Program: _____

Length of Program: _____ OTHER SKILLS OR TRAINING _____

3. VOLUNTEERING PREFERENCES

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

<u>Times</u>	<u>Morning</u>	<u>Afternoon</u>	<u>Evening</u>
<u>Monday</u>			
<u>Tuesday</u>			
<u>Wednesday</u>			
<u>Thursday</u>			
<u>Friday</u>			
<u>Saturday</u>			
<u>Sunday</u>			

PROGRAMS: POSITIONS IN WHICH YOU ARE INTERESTED (PLEASE CHECK ALL THAT APPLY)

Administration/Reception (A) Community Connection Mentorship Program (CCMP)
 Cycling Program (CP) Job Search Workshop (JSW) Library Settlement Program (LSP)
 Newcomer Youth Program (NYC) Newcomer Senior Program (NSP) Roma
 Newcomer Settlement Education Program Settlement Workers in Schools (SWIS)
 Other: _____

REFERENCES

Please provide two references. At least one should be an employee/supervisor/teacher or an individual who is not related by family ties to you. The other can be a personal friend or family member.

1 Last Name: _____ First Name: _____

Relationship to Applicant: _____ Phone #: _____

Email: _____

2 Last Name: _____ First Name: _____

Relationship 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 _____