



## Volunteer Application

Your Contact Information Please Print Clearly

Date

Name		
Street address		
Mailing address		
Phone		
Email	<small>Do you consent to receiving email</small>	
Age	Under 19	Over 19

Which program are you interested in applying for? Check all areas of interest.

- Lunch with the bunch
- Food bank
- Food bank garden
- Family place resource centre
- Front desk at office
- Board of directors
- Drivers
- Tax Preparation

When are you available to volunteer?

Check all that apply

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning						
Afternoon						

How often can you volunteer?

- Once a week
- Once a month
- Other \_\_\_\_\_

Describe any work experience relevant to the program you are interested in

Describe any volunteer work experience you may have had

What health problems or physical limitations do you have that may affect your volunteer activity?

Are you currently receiving services from HCS? Yes No

If yes, please specify what service you are receiving \_\_\_\_\_

\_\_\_\_\_

**References**- list 2 people who can attest to your skills, ability and dependability, include past/present employer (if applicable).

Name or Organization	How do they know you?	Phone	Length of Relationship

**Criminal record check**

All Hope Community Services volunteers are required to complete CRC including the vulnerable sector portion before volunteering. After your interview with the volunteer coordinator, you will be asked to have a criminal record check completed by the RCMP

All volunteers are required to sign the HCS Code of Conduct and Confidentiality forms before being placed in a volunteer position.

Signature of applicant \_\_\_\_\_

Date \_\_\_\_\_

\_\_\_\_\_

Parent/Guardian Signature if applicant under 19 years of age

Date \_\_\_\_\_