

Please print

Name: _____
Surname Given Names

Address: _____
Street City Province Postal Code

Home Phone: _____ Work Phone: _____

Cell Phone: _____ E-Mail: _____

What days are you available? M T W Th F S What time(s) are you available? am pm eve

Date available to start: _____

Type of Volunteer Work Requested: _____

Qualifications: _____

Location Requested: _____

Occupation (Presently): _____

Volunteering with Contact Instructor/Teacher (if applicable): _____

Criminal Record Check (dated within six months)

T.B. Test Results (dated within the year)

Applicant's Signature

If an interview is required:

Interview Date: _____ Time: _____

Interviewed by: _____

Comments: _____
