

## VOLUNTEER APPLICATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Email-address: \_\_\_\_\_

Telephone Number/s: \_\_\_\_\_

Languages spoken: \_\_\_\_\_

Language written: \_\_\_\_\_

### AVAILABILITY:

#### ***I can commit to volunteering:***

( ) Yes, Three to six months

Specify: \_\_\_\_\_

#### *I would like to volunteer*

( ) Yes, 3-4 hours per week

( ) Yes, 8-12 hours per month

Specify: \_\_\_\_\_

#### *Time and Days Preferred*

Mornings ( )      Afternoons ( )      Evenings ( )      Weekends ( )

Specify days that work best for you: \_\_\_\_\_

### **Please indicate (by check mark) areas of interest and experience:**

|                            | Interested | Some Experience | Very Experienced |
|----------------------------|------------|-----------------|------------------|
| Client Support             | _____      | _____           | _____            |
| Administrative/Office      | _____      | _____           | _____            |
| Interpretation/Translation | _____      | _____           | _____            |
| Group Facilitation         | _____      | _____           | _____            |
| Board/Committee            | _____      | _____           | _____            |
| Special Events/Fundraising | _____      | _____           | _____            |
| Clinical Services          | _____      | _____           | _____            |
| Other: _____               | _____      | _____           | _____            |

### **Please summarize any special skills/interests/training:**

\_\_\_\_\_  
\_\_\_\_\_

**What other community organizations have you volunteered and are still volunteering with?** (Please list names of organizations and dates volunteered)

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**How did you become interested in volunteering at REFUGE and how do you know you will make a difference:**

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**Personal and Professional References:**

Please provide a phone number and email or mailing address of two references that we may contact. Ideally at least one reference will be someone you have volunteered or worked with, one reference will be someone who has known you for 2 years or more.

**Name:** \_\_\_\_\_

Email: \_\_\_\_\_ or,

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone #: \_\_\_\_\_

**Name:** \_\_\_\_\_

Email: \_\_\_\_\_ or,

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone #: \_\_\_\_\_

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I hereby declare that the information provided in this application is true and complete, to my knowledge, and by signing I give Refuge the authority to contact my references and verify the information. I further understand that my volunteering at Refuge does not guarantee me consideration for, or appointment to, any paid position that may be available at the Organization during or after my involvement at the Centre. I understand that dependent on my level of involvement at Refuge, I will be required to sign a Memorandum of Understanding.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

***For some positions a Police Record Check will be required. The police records check form will be completed at the interview. Police Record Checks' must be presented and picked up in person at the Central Records Branch, Hamilton Police Services, 155 King William Street.***