



Volunteer Application

Your Contact Information Please Print Clearly

Today's Date

Name		Date of Birth <small>d/m/y</small>
Street Address		
City		Postal Code
Mailing Address <small>If different than above</small>		
Home Phone		
Cell Phone		
Email Address		Do you consent to your email address being added to the AHCSS newsletter mail list?

Emergency Contact

Name	
Phone	
Relationship to you	

What position or program are you applying for? Check all areas of interest.

- | | |
|--|---|
| <input type="checkbox"/> Agassiz Thrift Store | <input type="checkbox"/> Family Parenting Place |
| <input type="checkbox"/> Better at Home Friendly Visitor | <input type="checkbox"/> Food Bank |
| <input type="checkbox"/> Building Maintenance and upkeep | <input type="checkbox"/> Friendly Phone |
| <input type="checkbox"/> Christmas events | <input type="checkbox"/> Seniors' Resource Services |
| <input type="checkbox"/> Drive4U Driver (<small>drivers abstract required</small>) | <input type="checkbox"/> Truck and Driver for pickup of donations |
| | <input type="checkbox"/> Other |

When are you available to volunteer?

Check all that apply.

	Sun	Mon	Tue	Wed	Thu	Fri	Sat
Morning							
Afternoon							
Evening							
Weekends							

How often can you volunteer?

- Once a week
 Once a month
 Other: _____

Notes

Please mention skills and experiences you find relevant for any of the programs you are interested in applying for.

References – list 3 people who know you and can attest to your skills, ability, and dependability, include current or previous employer (if applicable).

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

Are you currently a client of AHCSS or receiving services from AHCSS? Yes No

If yes, please specify what service you are receiving. _____

Police Information Check (PIC)

All AHCSS volunteers are required to have a completed Police Information Check including the vulnerable sector portion. When AHCSS has received your application, completed PIC, and any other required documents, the volunteer coordinator will be in contact.

All volunteers are required to sign the AHCSS Volunteer Code of Conduct before they are placed in a volunteer position.

Signature of applicant

Date

Parent/Guardian Signature if applicant under 18 years of age

Date

Privacy Practice Statement

We protect your personal information and adhere to all legislative requirements with respect to privacy. We do not rent, sell or trade our lists of volunteers. We use your personal information to keep informed and up to date activities of the organization and its specific programs including, but not limited to; opportunities to volunteer, upcoming events, educational opportunities and seasonal greetings.