



VOLUNTEER APPLICATION FORM

Please submit completed application form to Lansdowne Children's Centre,
39 Mount Pleasant Street, Brantford, ON N3T 1S7 Attention: Kimberly Alfreds

NAME: _____ PHONE: _____

ADDRESS: _____

CITY: _____ POSTAL CODE: _____ EMAIL: _____

Tell us about yourself.....

Educational Background: _____

Current Occupation: _____

Hobbies, Interests, Skills: _____

Is there a particular type of volunteer work in which you are interested? (check all that apply)

Working with children Helping in our office with general duties

Other: _____

At what times are you interested in volunteering?

Flexible or Prefer weekdays: mornings afternoons Weekends (Special Events)

There are times during the week when I am not available to do volunteer work:

Please specify: _____

How did you hear about us?

Newspaper From client of agency Referred by friend/volunteer

Other _____

Please turn over.....

Tell us why you are interested in volunteering for Lansdowne

REFERENCES

References should be someone who is familiar with your skills, but not an immediate family member. This person may be a co-worker, neighbour, teacher or supervisor.

Reference #1 Name: _____ Phone # _____
(Please print)

Relationship: _____

Reference #2 Name: _____ Phone # _____
(Please print)

Relationship: _____

Are there any other considerations that may influence your volunteer placement?

No

Yes (please explain) _____

VOLUNTEER EXPERIENCE: Please list any previous/current volunteer experience and why you feel that you would be suitable for the position.

I certify that the information contained in this application is true, correct and complete to the best of my knowledge. I hereby grant permission to Lansdowne Children's Centre to contact the above named references.

Name (Please print)

Signature

Date

Please Note: It is the responsibility of Lansdowne Children's Centre to provide a safe environment for clients, volunteers and staff. For this reason all new volunteers must, as a condition of volunteer placement, submit acceptable Children's Aid Society background check, police clearance certificate and certification that you are free from active tuberculosis and other communicable/contagious diseases.