



VOLUNTEER APPLICATION FORM

GENERAL INFORMATION		
NAME:		
ADDRESS:		APT #:
CITY:	PROVINCE:	POSTAL:
HOME PHONE: ()	ALTERNATE PHONE: ()	
E-MAIL ADDRESS:		
EMERGENCY CONTACT NAME:		PHONE :
<input type="checkbox"/> I am between 16 and 18 years of age	<input type="checkbox"/> I am over 18	
EXPERIENCE AND TRAINING (PLEASE ATTACH RESUME IF AVAILABLE)		
Languages: <input type="checkbox"/> English spoken <input type="checkbox"/> French spoken <input type="checkbox"/> Other _____ <input type="checkbox"/> English Written <input type="checkbox"/> French Written		
SKILLS, EXPERIENCE, INTERESTS: Present/previous volunteer or work experience:		
How did you learn about the Red Door Family Shelter?		
PLEASE INDICATE YOUR AREA(S) OF INTEREST		
<input type="checkbox"/> Child Care Program	<input type="checkbox"/> ESL Teacher, Translator, Tutor	<input type="checkbox"/> Sorting Donations
<input type="checkbox"/> Workshop Instructor	<input type="checkbox"/> Creative Work with Residents	<input type="checkbox"/> Recreation
<input type="checkbox"/> IT & Computer technician	<input type="checkbox"/> Community Liaison	<input type="checkbox"/> Events
<input type="checkbox"/> Maintenance/ Gardening	<input type="checkbox"/> Kitchen / Cooking	<input type="checkbox"/> Arts & Crafts
<input type="checkbox"/> Administration/ Office	<input type="checkbox"/> Volunteer Driver	<input type="checkbox"/> Sewing
<input type="checkbox"/> Cleaning/ Painting	<input type="checkbox"/> Your Project or Idea	



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AVAILABILITY							
Please indicate your availability (including number of hours and time of day)							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

REFERENCES		
Please provide one personal and one professional, educational or volunteer reference (excluding family members)		
Name	Address	Phone Number

A criminal records check will be required prior to the acceptance of an individual as a volunteer of Red Door Family Shelter.

I hereby give permission to Red Door Family Shelter to check the provided references and to conduct a criminal record check. I also understand that volunteer placement is conditional upon receipt of satisfactory references and criminal records check. I declare that the information provided in the application is true and accurate to the best of my knowledge.

Signature of Applicant

____/____/____
Date

Red Door respects your privacy and adheres to all legislative requirements with respect to protecting privacy. Your personal information will be used for the volunteer application process and related program purposes such as notification about recognition events. From time to time, Red Door may contact you about upcoming events, programs, and fundraising opportunities.

☐ If you prefer not to receive this information, please check this box.

PLEASE SEND COMPLETED FORM TO THE ADDRESS BELOW BY MAIL, EMAIL OR FAX