

community volunteer network

Beausejour-Brokenhead Community Volunteer Registration Form

Thank you for your interest in volunteering.

Please fill out the form and attach a resume if you have one.

I. GENERAL INFORMATION

First Name: _____ Last Name: _____

Address: _____

City: _____ Province: _____ Postal Code: _____

Home #: (____) _____ Business #: _____ Fax # _____

Cell#: (____) _____ Email: _____

How do you want us to reach you?

Mail Phone Fax E-mail

How did you find out about the Comm-Unity Volunteer Network?

Word-of-mouth Friend
 Work place Special Event
 Media (i.e. radio, newspaper) Other _____

What best describes your current situation?

Employed Retired Seeking work Student Other _____

Why would you like to volunteer?

Do you have access to a computer? Yes No; the internet? Yes No

Do you speak any languages in addition to English? If yes, which one(s)?

1. _____ 2. _____

Please send completed form to Network 4 Change:
Fax (204) 268-9490 Email jessicacampbell@mymts.net

II. WHAT KIND OF VOLUNTEER WORK DO YOU WANT TO DO?

Are there any areas within the community that you are specifically interested in volunteering your time?

- | | |
|--|---|
| <input type="checkbox"/> Early Years (Day Care/Nursery School/PreSchool Programs) | <input type="checkbox"/> Youth Programs (Mentorship/Tutoring/Drop in Center/Clubs/4-H) |
| <input type="checkbox"/> Seniors Program (Recreation/Spiritual Care/Visiting) | <input type="checkbox"/> Health Facilities (Hospitals/Care Homes) |
| <input type="checkbox"/> Community Facilities (Library/Museums/SunGro Centre) | <input type="checkbox"/> Social Services (Food Bank, Hampers, 2 nd Hand Store) |
| <input type="checkbox"/> Sport/Recreation Clubs (Coaching, Bonspiels, Sports Events) | <input type="checkbox"/> Community Beautification (Gardens/Parks) |
| <input type="checkbox"/> Special Events (CPTC/Family Fun Day/Rodeo) | <input type="checkbox"/> Canvassing (Food Drive/Red Cross/Heart & Stroke) |
| <input type="checkbox"/> Other (specify) _____ | |

Other Area(s): Some specific examples would be: deliveries for seniors, childcare at special events, canvassing, helping set up for a sports event.

Is there anything else that you would like to tell us about your skills/ experience / interests?

III. REFERENCES

Please provide two references. These should be an employer/supervisor or an individual you know through community involvement, that you have known for at least 6 months.

Name: _____

Email: _____

Phone: (____) _____

Relationship to Applicant: _____

Name: _____

Email: _____

Phone: (____) _____

Relationship to Applicant: _____

Emergency Contact:

Name: _____

Phone #: (____) _____

V. CONSENT

I hereby authorize Network 4 Change to obtain references from the above individuals in connection with my (my child's) application for a volunteer position. I hereby authorize the above named individuals to provide a reference in connection with my (my child's) application for a volunteer position with Network 4 Change, and release them from any liability in regard to it.

I consent that my name may be forwarded to community organizations that require volunteers.

I hereby certify that all information included in this application form is true and complete.

Signature: _____ Date: _____

Parent Signature: _____ Date: _____
(if under 18 years old)

When the story of these times gets written, we want it to say that we did all we could, and it was more than anyone could have imagined.

-Unknown