

Weston/Mt Dennis Site - 1167 Weston Road, Toronto ON M6M 4P5

Bloor Site - 1709 Bloor St. West 2nd Floor, Toronto ON M6P 4E5

Tel: (416) 249-7946 Fax: (416) 249-4219 email: info@humberseniors.org

VOLUNTEER APPLICATION FORM

We appreciate your interest in volunteering with West Toronto Support Services. Please complete this form and return it to our office. Please note that reference **letters** and **forms** will only be given out after completion of three months within thirty hours of volunteer service.

Our screening process includes a Police Records Check – any unpardoned criminal convictions will disqualify an applicant.

Personal Information:

Date: _____

Last Name _____

First Name: _____

Address: _____

City: _____ Postal Code: _____

Phone Number: _____ Home Work Cell

Alternate Number: _____ Home Work Cell

Email Address: _____

Emergency Contact:

Name: _____ Phone Number: _____

Background

Are you a student? Yes No

Are you currently employed? Yes No Position: _____

Place of Employment: _____

If no, are you retired? Yes No

How did you hear about us? _____

What languages are you comfortable with?

_____	<input type="checkbox"/> Read	<input type="checkbox"/> Write	<input type="checkbox"/> Speak
_____	<input type="checkbox"/> Read	<input type="checkbox"/> Write	<input type="checkbox"/> Speak
_____	<input type="checkbox"/> Read	<input type="checkbox"/> Write	<input type="checkbox"/> Speak

Work / Volunteer ExperiencePosition: _____ Work Volunteer

Name of Organization: _____ Duration: _____

Description: _____

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Description: _____

Please list any hobbies or special skills that you have that may be relevant to our clients' needs:

What are your objectives in volunteering with us?

Availability

- Monday Tuesday Wednesday Thursday Friday
- Mornings Afternoons Other

What positions are you interested in? Please check your preferences below:

- Meals on Wheels Runner (10: 30am - 12: 30 pm) Office Assistant (Bloor Site Only)
- *Meals on Wheels Driver (10: 30 am - 1:00 pm)* Adult Day Service
- Community Dining Assistant (Bloor Site Only) Special Events
- Wellness Programs (Weston Site Only) Agency Promotion
- Telephone Reassurance

These positions require a valid Driver's license and a clean driving record.

References:

Please provide three non-family references. At least one reference should include a person that is familiar with your work/education/volunteer history, i.e. a supervisor, co-worker, volunteer supervisor, teacher, professional, etc.

Name: _____ Telephone: _____

How does this person know you? _____

How long has this person known you? _____

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Attachments

Please mention any attachments that you have included with your application.

Cover Letter Resume Certification Police Reference Check

Other _____

Permission Statement

I give West Toronto Support Services permission to contact the above references in order to discuss my suitability as a volunteer.

Your Signature: _____ Date: _____

I hereby declare that the foregoing information is true and complete, to my knowledge. I understand that a false statement may disqualify me from employment or cause my dismissal.

Your Signature: _____ Date: _____

Please note that if you are 18 years of age or under, you must have a parent/ legal guardian sign, giving you permission to volunteer for West Toronto Support Services.

Parent Guardian Signature: _____ Date: _____

We will protect and respect your privacy. Your personal information is used only for volunteer application purposes. Our Privacy Statement is available anytime, upon request. This Agency has adopted the Code for Volunteer Involvement in all its policies, practices and procedures.

Thank you for your interest in volunteering with West Toronto Support Services!