



## Volunteer Application Form

*\*\* Please Print \*\**

**First Name:** \_\_\_\_\_ **Last Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

**Nearest Major Intersection:** \_\_\_\_\_

**Home Telephone:** \_\_\_\_\_ **Alternate Telephone:** \_\_\_\_\_

**Are you over 18 years of age?**  Yes  No

**Do you have a valid Ontario Driver's Licence?**  Yes  No

**Do you have access to a vehicle?**  Yes  No

**Present Occupation:** \_\_\_\_\_

**Past Volunteer Experience:**

Date		Name of Agency/Organization	City
From	To		

**Languages (Spoken):** \_\_\_\_\_  
**(Written):** \_\_\_\_\_

**Please list two References:**

**Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**OVER ⇨**

**Please describe briefly why you would like to volunteer at Interim Place.**

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**Please specify any experience you have that you feel may be valuable in supporting abused women and their children.**

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**Please indicate specific skills that you may want to apply in your volunteer work (i.e. hobbies, interests, certifications, personal talents or attributes).**

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<b>Notes</b> (For Office Use Only)