

Volunteer Application

| | Application Date: | |
|--------------------|--|--|
| | | |
| Name: | | |
| Address: | | |
| Phone: | | |
| Email: | | |
| Best time to conta | act you: | |
| Are you over the a | age of 19: yes no: | |
| · | r skills, hobbies and interests: | |
| | | |
| | | |
| What is your highe | nest completed level of education? | |
| | asons for wanting to participate as a Waypoints volunteer? | |
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| | | |

| What skills, training and/or knowledge do you wish to | contribute at Waypoints? |
|--|--------------------------------------|
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| List current and previous volunteer work (please includations) activities, dates of service, and the organizations). | de a brief description of duties and |
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| When are you available to volunteer and for how long | ? |
| Time of day: | |
| Day(s) of the week: | |
| How often per week/month: | |
| For how long: | |
| How did you learn about Waypoints' Volunteer Progra | |
| Tiow did you learn about waypoints volunteer Frogra | III: |
| | |
| | |
| | |

| experience | | | | | |
|--|---------------------|-----|----|--|--|
| Name | contact information | | _ | | |
| Name | contact information | | | | |
| Name | contact information | | | | |
| Are you willing to provide a certification | ate of conduct? | Yes | No | | |
| Are you willing to provide a Child, 'Record Check? | Youth and Family | Yes | No | | |
| Do you have a driver's license? | Yes | No | | | |
| Do you have access to reliable tran | Yes | No | | | |
| Physical limitations: | Yes | No | | | |
| If yes please explain how we may accommodate you. | | | | | |
| | | | | | |
| | | | | | |
| Any allergies we should know about: | | | | | |

Please list three names of people (not relatives) who can speak to your character and

| Contact in Case of Emergency: | |
|--|---|
| Name: | |
| Address: | |
| Phone: | |
| Email: | |
| | |
| Please read carefully before signing this application | on |
| I understand that this is an application for and not opportunity. | t a commitment or promise of volunteer |
| I certify that the information I provide throughout application for a volunteer position and in interviews complete to the best of my knowledge. I certify that answer all questions to the best of my ability and to information that would unfavourably affect my applicate. | with Waypoints Inc. is true, correct and t the information I have and will provide hat I have not and will not withhold any |
| I understand that information contained on my applicant understand that misrepresentations or omissions may an applicant for a volunteer position with Waypoints In | y be cause for my immediate rejection as |
| Signature of Applicant | Date |