

Volunteer Kamloops Application Form

All the questions are your choice of whether to answer them or not.

DATE:

| | |
|--|--|
| First Name: | Last Name: |
| Home Address: | |
| City: | Area: <i>Eg: North Shore</i> |
| Postal Code: | Home Phone: |
| Cell phone: | Work phone: |
| Email: | |
| Preferred Contact Method: Do we have your permission to?: <input type="checkbox"/> Email-YES <input type="checkbox"/> Phone | |
| Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female | |
| Age Range: <input type="checkbox"/> 12-14 <input type="checkbox"/> 15-18 <input type="checkbox"/> 19-24 <input type="checkbox"/> 25-29 <input type="checkbox"/> 30-34 <input type="checkbox"/> 35-39 <input type="checkbox"/> 40-44 <input type="checkbox"/> 45-49 <input type="checkbox"/> 50-54 <input type="checkbox"/> 55-59 <input type="checkbox"/> 60 + | |
| Current Employment Status: <input type="checkbox"/> Employed (Part-Time) <input type="checkbox"/> Employed (Full-Time) <input type="checkbox"/> Unemployed <input type="checkbox"/> Others : _____ | |
| Transportation: Bus: <input type="checkbox"/> Yes <input type="checkbox"/> No Vehicle: <input type="checkbox"/> Yes <input type="checkbox"/> No License class? _____ | |
| How did you hear about us? | |
| <input type="checkbox"/> Brochure | <input type="checkbox"/> Phone Book |
| <input type="checkbox"/> Internet | <input type="checkbox"/> Presentation |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Radio/TV |
| <input type="checkbox"/> School | <input type="checkbox"/> Other Publication |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Employment Agency |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Word of Mouth |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Welcome Wagon |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Social Service Agency |
| Why have you chosen to volunteer? | |
| <input type="checkbox"/> Course requirement | <input type="checkbox"/> Meet people |
| <input type="checkbox"/> New to community | <input type="checkbox"/> Work experience |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Remain Active |
| <input type="checkbox"/> Other: _____ | <input type="checkbox"/> Improve English |
| Are you looking for a specific volunteer opportunity? | |
| Previous volunteer experience: | |
| Training: <input type="checkbox"/> First Aid <input type="checkbox"/> Food Safe <input type="checkbox"/> Serving it Right <input type="checkbox"/> WorldHost <input type="checkbox"/> Diploma <input type="checkbox"/> Degree <input type="checkbox"/> Certificate <input type="checkbox"/> Other: _____ | |
| Do you have any health restrictions that may affect your ability to volunteer? <i>If yes, please provide further details.</i> | |
| <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Can you communicate/speak in other languages? If so, then please list them all:

What days and times are you available to volunteer?
 Weekdays Weekends Mornings Afternoons Evenings

Would you like to be added to our VK Core Volunteer List? Yes No
Eg: Volunteering for Special Events, Canada Day, Tournaments, Membership Drives, Busy Times, Needing Extra Hands, etc.

Can we forward your contact information to Emergency Services to help in case of a community emergency? *Eg: Disaster Response Programs, Floods, Fires, etc.* Yes No

What type of placement would you prefer? Please only choose a maximum of *FOUR* categories.

| | | | |
|---|---|---|--|
| <input type="checkbox"/> Admin/Finance | <input type="checkbox"/> Cultural (art, music, theatre) | <input type="checkbox"/> Law Enforcement | <input type="checkbox"/> Social Activities |
| <input type="checkbox"/> Animals | <input type="checkbox"/> Driving | <input type="checkbox"/> Maint/Handyman | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Arts/Crafts | <input type="checkbox"/> Education/Tutoring | <input type="checkbox"/> Mental Health | <input type="checkbox"/> Special Needs |
| <input type="checkbox"/> Beautician | <input type="checkbox"/> Entertainment | <input type="checkbox"/> Multicultural | <input type="checkbox"/> Sport/Recreation |
| <input type="checkbox"/> Board/Committee | <input type="checkbox"/> Environmental | <input type="checkbox"/> Office Clerical | <input type="checkbox"/> Work with Youth |
| <input type="checkbox"/> Children | <input type="checkbox"/> Fundraising Events | <input type="checkbox"/> Outdoors | |
| <input type="checkbox"/> Computers | <input type="checkbox"/> Gardening | <input type="checkbox"/> Retail/Cashier | |
| <input type="checkbox"/> Corrections/Court Work | <input type="checkbox"/> Health/Hospital | <input type="checkbox"/> Safety | |
| <input type="checkbox"/> Counsel/Guidance | <input type="checkbox"/> Kitchen/Food Services | <input type="checkbox"/> Service to Seniors | |

I hereby give permission to release my name to organizations requesting volunteers in areas where I have shown interest:

Signature: _____ **Date:** _____

OFFICE USE ONLY

| Job # | Organization Name | |
|--------------|--------------------------|--|
| # _____ | _____ | <input type="checkbox"/> Walk-In |
| # _____ | _____ | <input type="checkbox"/> Appointment |
| # _____ | _____ | <input type="checkbox"/> Phone Interview |
| # _____ | _____ | <input type="checkbox"/> Email |

Interviewed by: _____ **Entered By:** _____

(Print first name) (Print first name)

Thank you for your support to the community.