**Durham Youth Services**

**82 Kings Crescent**

**Ajax, ON**

**L1S 2M6**

****

**VOLUNTEER APPLICATION FORM**

**PERSONAL INFORMATION:**

|  |  |
| --- | --- |
| **Name:** |  |
| **Date of Birth:** |  |
| **Address:** |

|  |
| --- |
|  |
|  |
|  |

 |
| **Phone:** |

|  |
| --- |
| H: |
| B: |
| C: |

 |
| **E-Mail Address:**  |  |
| **Emergency Contact:**  |  |

**BACKGROUND:**

**Education**:

|  |  |
| --- | --- |
| **Institution**  | **Program**  |
|  |  |
|  |  |
|  |  |

**Current/Past Occupation:**

|  |  |
| --- | --- |
| **Organization** | **Position** |
|  |  |
|  |  |
|  |  |
|  |  |

**Current/Previous Volunteer Experience:**

|  |  |  |
| --- | --- | --- |
| **Organization** | **Position** | **Dates of service (yy/mm)****From: To:** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**POSITION APPLIED FOR:**

**Type of Volunteer Work Preferred (***Check all that apply)*

|  |  |  |
| --- | --- | --- |
| * *Fundraising Events*
	+ Joanne’s House sponsored event
	+ Individual Fundraising
 | * *Mentorship Program*
* Homework
* Life skills
 | * Sports
* Other
 |
| * *Hosting at Delta Bingo*
 | * *Sports/Game Night Activities*
 |
| * *Maintenance*
* Cooking
* Cleaning and repairs
 | * *Governance*
* Board of Directors
* Board comittee
 | * *Trade Skill*
	+ Electrical
	+ Plumbing
	+ General
 |

**Availability:**

When are you able to volunteer?

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Days** | **Sunday** | **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** |
| **Hours** |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**Hobbies, Skills, Interests:**

**Languages Spoken:**

**Physical Limitations:**

**References:**

List the name and telephone number of two personal references:

(They must not be relatives or close personal friends)

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I authorize Durham Youth Housing and Support Services, Volunteer Chair to call the above references.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature Date

**Volunteers must provide references and a Police Background Check to work with youth outreach clients or confidential information. It is the volunteer’s responsibility to obtain a Police Background Check** **with a vulnerable sector police clearance. All information received is kept in strictest confidence by the Agency.**