



VOLUNTEER APPLICATION FORM

To apply to be a volunteer at the Genesis Centre please fill out the form below. Note that you must be 14 years of age or older to qualify. When complete, please drop it off at the Genesis Centre front desk.

First Name: _____

Last Name: _____

Address: _____

City: _____ Postal Code: _____

Date of Birth: _____ Preferred Phone: _____

Email: _____

Have you ever been criminally convicted? Yes No

Emergency Contact Information

First Name: _____

Last Name: _____

Preferred Phone: _____ Relation to You: _____

Volunteer Information

Work Preference: Outside Inside No Preference

What days and hours of the week are you available?

Monday Hours: _____ Tuesday Hours: _____

Wednesday Hours: _____ Thursday Hours: _____

Friday Hours: _____ Saturday Hours: _____

Sunday Hours: _____

Preferred Start Date: _____

Tell us about your volunteer/guest service experience (list specific duties):

Have you ever volunteered at Genesis Centre before? Yes No

If yes, position/department and year: _____

Hobbies and Interests: _____

Relatives or friends working at Genesis Centre: Yes No

Are you a member of Genesis Centre? Yes No

If yes, what type of pass: _____

Educational/technical training (institution, program, completion date and degree/diploma):

Are you presently attending school? Yes No

Do you have a police records check? Yes No

If no, are you willing to get one? Yes No

Do you have a valid First Aid/CPR Certificate? Yes No

Do you have a valid WHIMIS Certificate? Yes No

Are you currently employed? Yes No

Most Recent Employment History

Employer's Name: _____

Employer's Address: _____

Job Title: _____ Contact Phone: _____

Employment Period: _____ Supervisor Name: _____

Reason for Leaving: _____

Duties and Responsibilities: _____

Reference Check Approval: Yes No

Volunteer Declaration

I hereby certify that the facts stated in this application for volunteering are true and complete to the best of my knowledge. I understand that if accepted to volunteer, falsified statements on this application are considered sufficient cause for dismissal.

Signature: _____ Date: _____

Your privacy is important to us. All personal information collected will be kept completely confidential for use by the Genesis Centre of Community Wellness for marketing and communication purposes only. No third parties will have access to this information for any reason.