



VOLUNTEER APPLICATION

Position Applying For <i>or</i> Area of Interest:	Today's Date:
---	---------------

Please Print Clearly

Personal Information

Last Name:	First Name:
No. & Street Name:	
City:	Postal Code:
Home Phone:	Email:

Availability

<input type="checkbox"/> Mon <input type="checkbox"/> Tues <input type="checkbox"/> Wed <input type="checkbox"/> Thurs <input type="checkbox"/> Fri <input type="checkbox"/> Sat <input type="checkbox"/> Sun	<input type="checkbox"/> Morning (8:30 am-12 noon) <input type="checkbox"/> Afternoon (12 noon-4:30 pm) <input type="checkbox"/> Evening (4:30-8:30 pm)
Location: <input type="checkbox"/> Kiwanis Seniors' Community Centre <input type="checkbox"/> Argyle Seniors' Satellite <input type="checkbox"/> Hamilton Road Seniors' & Community Centre <input type="checkbox"/> Boyle Seniors' Satellite	

Volunteer Experience

Volunteer Position 1	Organization: _____ Length of Volunteer Position _____ Primary Duties: _____ _____
Volunteer Position 2	Organization: _____ Length of Volunteer Position _____ Primary Duties: _____ _____

Relevant Work Experience

Work Experience 1	Organization: _____ Type of Business: _____ Position Title: _____ Length of Position: _____ Primary Duties: _____ _____
Work Experience 2	Organization: _____ Type of Business: _____ Position Title: _____ Length of Position: _____ Primary Duties: _____ _____

Additional Relevant Skills:

<input type="checkbox"/> Keyboarding (50+wpm)	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Fitness Instructor (certified)
<input type="checkbox"/> Yoga Instructor (certified)	<input type="checkbox"/> Other: _____	

What do you hope to gain from this position? _____

Volunteering Opportunities

If the Centre you are currently applying to is unable to provide you with the type of work you are interested in, would you be willing to volunteer at another City of London location?

Yes No If yes, which area of the City would be ideal? _____

References: See attached pages. Please have 3 people complete (not family members) and return with application.

Consent:

I hereby authorize the Corporation of the City of London to obtain references from the above individuals in connection with my application for a volunteer position.

I hereby authorize the above named individuals to provide a reference in connection with my application for a volunteer position with the City of London, and release them from any liability in regard to it.

I hereby certify that all information included in this application form is true and complete.

Signature: _____ Date: _____

**Thank you for your interest in volunteering with the
City of London's Seniors Centres**



CITY OF LONDON SENIORS CENTRES & SATELLITES

Kiwanis Seniors' Community Centre . Hamilton Road Seniors Centre & Community Centre .
Argyle Seniors' Satellite . Boyle Seniors' Satellite

London
CANADA

From: Tracy Drenth, Supervisor
City of London

Date: _____

RE: VOLUNTEER REFERENCE CHECK FOR: _____

The above mentioned applicant has applied for a volunteer position at one of the Seniors Centres' with the City of London, and has given your name as a reference. Would you please fill out this form and return it to us as soon as possible. Please be assured that all information will be held in the strictest confidence.

I, _____ give permission for _____
Applicant Name Reference Name
to release information relevant to my application for a volunteer position with the City of London.

Name of reference: _____ Phone: _____

Signature: _____

1. a) How long have you known the applicant? _____

b) In what context have you known the applicant? _____

2. Is the applicant reliable enough to honour a commitment to volunteer on a regular basis?

3. How does he/she relate to others? _____

4. What special qualities/abilities do you feel the applicant has that you think would be valuable in performing volunteer services? _____

5. Do you know of any particular weakness which might hinder the applicant's performance? (i.e. inability to be reliable or punctual; inability to honour confidential information).

6. Would you recommend this person to work as a volunteer with the City of London? _____
If not, please indicate or call our office

Other comments: *please use reverse side of this sheet*

Signature: _____ Date: _____

Telephone: (519) 661-2500, ext 5769 ● Email: tdrenth@london.ca