



Office Use Only	
<i>Date Received:</i>	_____
<i>Interview Completed:</i>	_____
<i>Police Check Received:</i>	_____
<i>Starting Date:</i>	_____

Shalom Manor & Gardens Volunteer Application Form

(please print)

Personal Information			
Name		Date	
Street Address		City	Postal Code
Phone Number	Email		Date of Birth (year optional)
Emergency Contact		Relationship to Applicant	Phone Number

Educational Background	
High School – indicate completed Gr. 9 Gr. 10 Gr. 11 Gr. 12	Post Secondary – please specify
Other Certification Completed	Relevant Courses/Workshops

Volunteer or Work History (if none, please provide Personal References)	
#1 Organization	Position
Duties/Responsibilities	
Supervisor's Name & Title	Contact Number
#2 Organization	Position
Duties/Responsibilities	
Supervisor/s Name & Title	Contact Number

I authorize the Coordinator of Volunteers to contact the above persons as references.	
<i>Signature:</i> _____	<i>Date:</i> _____

Why are you interested in volunteering for Shalom Manor & Gardens?

Can you communicate in Dutch?	If yes, can you (choose all that apply):
Yes No	Speak Write Understand

What accommodations/supports (if any) do you require to enable your full participation as a volunteer?

Have you ever been convicted of a criminal offence for which a pardon has not been granted?
 Yes No

Are you willing to complete a Police Check? (successful applicants will be required to complete a Police Check)
 Yes No

Availability – Please check all that apply							
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

Areas of Interest	
Administration Administrative Assistance Reception Fundraising Events	Housekeeping/Laundry Sewing/mending Labeling Plant care/flower arranging
Dietary Breeze's Café General Store	Maintenance Projects
Nursing/Supportive Services Mealtime Partner Hair Dressing Porters Hand Massage/Stimulation Hair Setting	Recreation Computers Knitting Reading Crafts Music Friendly Visiting Outings Games Portering

Other:

I hereby certify that the facts set forth above are true and complete to the best of my knowledge. I understand that falsified statements on this application shall be considered sufficient cause for dismissal.

Signature: _____ Date: _____

Guardian/Parent Signature: _____ (if volunteer is under age 18)

Please forward this form to the Coordinator of Volunteers at Shalom Manor & Gardens.
 Once your form is received, you will be contacted for an interview.