

## VOLUNTEER APPLICATION FORM

### CONTACT INFORMATION

NAME: \_\_\_\_\_

PRIMARY PHONE: \_\_\_\_\_ OTHER PHONE: \_\_\_\_\_

EMAIL\* ADDRESS: \_\_\_\_\_

\*if you provide your email address you thereby agree to receive email notifications from Foyer Maillard

MAILING ADDRESS: \_\_\_\_\_

### EXPERIENCE/SKILLS

**DO YOU HAVE EXPERIENCE (PAID, PERSONAL OR VOLUNTEER) THAT WOULD BE RELEVANT TO YOUR VOLUNTEER WORK HERE? PLEASE EXPLAIN.**

---

---

---

---

---

---

**PLEASE INDICATE ANY SKILLS, INTERESTS OR HOBBIES THAT MIGHT BE HELPFUL IN YOUR VOLUNTEER WORK.**

---

---

---

LANGUAGES SPOKEN, WRITTEN OR READ: \_\_\_\_\_

### AVAILABILITY

DAY(S) OF THE WEEK: \_\_\_\_\_ TIME OF THE DAY: \_\_\_\_\_

FREQUENCY THAT YOU WISH TO VOLUNTEER:      WEEKLY      MORE THAN ONCE/WEEK  
MONTHLY      ON OCCASION ONLY (EG. SPECIAL EVENTS)

**AREAS OF INTEREST**

Please take some time to read through the Volunteer Service Assignments to assist in filling out this section. Please fill in "OTHER" with your own ideas should you not see a job assignment that interests you. **Check all that apply.**

- One to One Visiting
- Gardening
- Walking
- Assisting with Active Games
- Assisting with Table Games
- Music Programs
- Performance (tell us which below)
- Newsletter production
- Website content editor
- Crafts
- Arts
- Other?

**REFERENCES**

**You must provide two references that will be able to attest to your personal character and work ethic.**

NAME: _____	NAME: _____
PHONE: _____	PHONE: _____
RELATION: _____	RELATION: _____

**PLEASE FEEL FREE TO ADD ANY OTHER INFORMATION YOU FEEL PERTINENT TO YOUR APPLICATION:**

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

I hereby certify that the information contained in this application is true to the best of my knowledge. I agree and understand that any false statements made in this application may be cause for termination of my volunteer position. **In signing this application, I am also granting permission to contact the above named references.** Applicants under 15 years require the parent/guardian signature as well as the parent/guardian consent form to be completed.

<b>Applicant Name:</b> _____	<b>Guardian Name:</b> _____
<b>Signature:</b> _____	<b>Signature:</b> _____
<b>Date:</b> _____	<b>Date:</b> _____