



Contact Information

Name: _____ Date: _____

Phone: (Home) _____ (Cell) _____

(Work) _____ (Other) _____

Address: _____

City: _____ Postal Code: _____

Emergency Contact: _____ Phone: _____

May we contact you at work? ☐ Yes ☐ No

How did you hear about us? _____

About You!

What type of Volunteer '*experience*' are you looking for? _____

Is there a particular type of Volunteer work or activity you are interested in? _____

Current Occupation/Past Time: _____



Your Special Skills or Training: _____

Your Hobbies & Interests: _____

Is there a person or group with whom you are particularly interested in working? (Check all that apply)

☐ Male ☐ Female ☐ Either
☐ Adults ☐ Seniors ☐ Teens ☐ No Preference ☐ Other: _____

At what times are you interested in volunteering?

☐ Flexible ☐ Weekdays ☐ Evening ☐ Weekends ☐ Other _____
☐ There are times I cannot Volunteer: _____

Do you have a geographic preference as to where you do Volunteer work?

☐ No ☐ Yes Where: _____

Do you have access to an automobile you can use for Volunteer work?

☐ No ☐ Yes ☐ Occasionally

Do you have any medical conditions of which we should be aware of? (i.e. allergies, back problems, etc.)

☐ No ☐ Yes Please specify: _____





Do you have questions or concerns about being a Volunteer that you would like to discuss in person?

☐ No ☐ Yes ☐ Please call me Comments: _____

When is the best time to set up a meeting to discuss Volunteer opportunities that may be right for you?

**A Criminal Reference Check is required for every Volunteer.
You will be reimbursed the \$5.00 fee upon submission of receipt.**

Thank you for your interest in our Volunteer Program

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Additional Notes