



Giving Hope Today

Volunteer Application /Information Form

Name: _____

Full Street Address: _____ Postal Code: _____

Telephone (H): _____ (Cell): _____ (Other) _____

Email: _____ Birthday: Month _____ Day _____

In Case of emergency, please contact: Name _____ Relationship _____

Telephone number for Emergency Contact (H) _____ (Cell) _____

Education / Professional Background: _____

Is this request for **Court Ordered Community Service Hours**? Yes No

How many hours did the Court order for you? _____ How many do you have left to do? _____

Date for hours to be completed? _____

I am on my own to find a suitable placement to do my hours.

I have been sent by the following agency: _____

My Supervisor's name is: _____ Phone # _____

Comments _____

Is this a request for **School Mandated Hours**? Yes No

How many hours do you have to do? _____ Are you in school full time? Yes No

Are you 16 years of age or older? Yes No

Areas of interest for volunteering: (check all areas of interest)

- Office/Administrative/Clerical / Data entry
- HR Professional/ payroll/accounting
- Food Banks (Sorting/ Stocking Shelves/ Cleaning) Can require lifting 10-20lbs at a time
- Thrift Stores (Sorting / Shelving/ Cleaning/ Testing/ Hanging Clothing)
- Preparing & Serving Meals on The Mobile Food Truck
- Teaching a Life Skill (What skill? _____)
- Maintenance / Repairs / Janitorial
- Emergency Disaster Services (Attending Emergencies (fires, disasters) Preparing food/ stocking/cleaning)
- Christmas Kettles
- Special Events
- Other _____

Previous volunteer experience: _____

Other than wanting to give back to your community why do you want to volunteer? What do you hope to gain?

What prompted you to choose The Salvation Army for your volunteer service? _____

How did you hear about our program? _____

Availability:

DAY	MORNINGS	AFTERNOONS
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		

References:

Please supply two references other than family members (i.e. , employer, friend, teacher or clergy)

Name: _____

Name: _____

Address: _____

Address: _____

Telephone: _____

Telephone: _____

Relationship: _____

Relationship: _____

Agreement:

If accepted as a Salvation Army Volunteer, I agree to the following:

- To participate in designated training sessions when provided, to help me in my volunteer assignment.
- To fulfill the volunteer hours agreed upon.
- To inform my supervisor if I am not able to meet my commitment, I understand that others depend on me.
- To wear required identification when on duty if required.
- To wear modest and appropriate clothing for the performance of my duty and position.
- I understand that I am responsible for all my personal belongings that I bring to the site.
- To maintain strict confidentiality.
- To provide my time and service without remuneration, including requesting items from the food bank or store for free or discounted.
- To adhere to the smoke free/drug free environment.
- To support the principles of The Salvation Army and Mission of The Salvation Army while on duty as a volunteer.
- To immediately report all injuries, accidents, or other incidents to my supervisor.
- That as a Volunteer, I have no right or authority to represent The Salvation Army as an official spokesperson, or to make any contract or binding promise of any nature on behalf of the Organization.
- To give The Salvation Army permission to contact the above named references.
- To obtain a current CPIC (Criminal Police Information Check).
- To complete a volunteer orientation, and permit us to hold a file/record regarding your placement.
- That submission of this application and/or CPIC does not guarantee a placement with our organization.

Applicant Signature

Date

Signature of parent or guardian – required for applicants under the age of eighteen (18)

Date

Signature of Volunteer Coordinator/ Supervisor of Volunteers

Date

Please return application form in person to Volunteer Coordinator Heather Smith at our Community & Family Services office 45 King St E. (corner of King St E and Albert St) 2nd Floor, or email to hsmith@oshawa-temple.org