



West End Senior's Network VOLUNTEER APPLICATION FORM

Today's Date: _____ Position Applied For: _____

- | | | |
|-------------------------------------------|-------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Admin | <input type="checkbox"/> Events / General | <input type="checkbox"/> C&C (Thrift Store) |
| <input type="checkbox"/> LUFV (Visitor) | <input type="checkbox"/> WS – Safeway (Shopper) | <input type="checkbox"/> WS – IGA (Shopper) |
| <input type="checkbox"/> Kay's Place | <input type="checkbox"/> SPC (Peer Counselor) | <input type="checkbox"/> Host _____ |
| <input type="checkbox"/> Instructor _____ | <input type="checkbox"/> Other _____ | |

Personal Information

Last Name: _____ First Name: _____

Phone: _____ Email address: _____

Address: _____ City: _____

Postal Code: _____ Date of Birth: **MM / DD / YY** (Tacking/funding purposes)

Emergency contact: _____ Phone: _____

Relationship to you: _____

Education & Employment/Volunteer Experience

Please indicate your last completed high school grade, any university degree(s), college certificate(s), and/or programs/courses you are currently enrolled in.

Please indicate your current or past Volunteering and/or Work Experience.

Transferable Skills and Interesting Hobbies

Please describe any training, talents, interests, computer skills, or hobbies you have that might be relevant to volunteering with the West End Seniors' Network. Please be specific as possible, we have many areas that you can use your skills.

Languages

What languages (other than English) do you:

Speak: _____ Read: _____ Write: _____



Availability

I am available at the following times (please check all that apply):

Monday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	Tuesday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon
Wednesday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	Thursday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon
Friday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	Saturday	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon

References

Name: _____

Organization: _____ Relationship: _____

Phone: _____ Email: _____

Volunteer Waiver

By signing below:

- I agree to abide by the policies and procedures of the West End Seniors' Network, to be respectful and considerate of all staff, volunteers, members and the community at large of the West End Seniors' Network when in Barclay Manor, the surrounding park, Clothes and Collectables.
- I agree that I will not accept any monetary or other gifts in exchange for providing my volunteer services, except those offered by West End Seniors' Network staff as appreciation for my volunteer services.
- I extend my permission to the staff of West End Seniors' Network to contact my references, at their discretion, at any point of my volunteer involvement at West End Seniors' Network.
- I understand that the information in this form will be used to determine my suitability as a volunteer for West End Seniors' Network. I understand that it will be used for internal purposes only and that West End Seniors' Network will not give, sell or otherwise disclose this information to external parties.
- I agree to West End Seniors' Network conducting a Criminal Record Check if required, prior to commencement of volunteer position applied for.

Signed

Date

Witnessed (WESN Staff Member)

Date

Please return to the Manager of Volunteer Resources
 1447 Barclay Street (Barclay Manor),
 Vancouver, BC V6G 1J6,
 Phone: 604 669 5051 email: volunteers@wesn.ca