



**West End Seniors' Network
Volunteer Application Form**

Date: DD MMM YYYY

Please indicate the position(s) that you are interested in:

- Admin/Reception Computer/Cell Phone Tutor Events/General Friendly Visitor
- Grocery Shopper Information and Referral C+C Thrift Store Transportation Driver
- Program Host: _____ Other: _____

Personal Information:

Last Name: _____ First Name: _____
 Phone: _____ Email: _____
 Address: _____ City: _____
 Postal Code: _____ Date of Birth: _____
 Emergency Contact: _____ Phone: _____
 Relationship to you: _____

Please tell us how you learned about volunteering with WESN:

- Internet Newsletter Poster Called/dropped in Public event
- WESN volunteer WESN member Other (please specify): _____

Please briefly describe why you are interested in volunteering with WESN:

Please list any relevant work, education, and volunteer experience (or attach resume):

Please list any transferable skills, interests, or hobbies that you have. Be as specific as possible as we have many programs and services that can use your talents!

Please tell us what languages (other than English) that you:

Speak: _____ Read: _____ Write: _____

What is your availability:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning						
Afternoon						

Reference:

Name: _____ Relationship: _____
 Phone: _____ Email: _____

Photo consent:

Photos are occasionally taken at WESN sites or events while volunteers are working. These photos may be shared internally or published in promotional materials such as our newsletter, website, or brochures. Do you consent to WESN taking and using photographs of you in print, online, or video material, with or without your name, for any lawful purpose?

- Yes, photos of me may be taken and used in WESN promotional materials.**
- No, photos of me may not be taken and used in WESN promotional materials.**

Confidentiality:

As a WESN volunteer, you are required to keep confidential all internal communications and all client, customer, member, staff, and volunteer information.

The West End Seniors' Network relies on volunteers to deliver our programs and services. By signing below you agree to:

- Carry out the responsibilities required by your volunteer position.
- Inform your program supervisor of any planned or unexpected absences.
- Volunteer for a minimum of 3 months.
- Conduct yourself in a professional manner when volunteering and treat all clients, customers, members, staff, volunteers, and the community at large with respect.
- Not accept any gifts from members or clients in exchange for your volunteer services.
- Consent to the West End Seniors' Network conducting a criminal record and reference check.
- Notify your program supervisor or the Manager of Volunteer Resources and Community Services as soon as possible if you are no longer able to carry out any of the responsibilities of your volunteer position.

Signature

Date