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**ABBOTSFORD YOUTH COMMISSION**

**VOLUNTEER APPLICATION**

Please note, volunteers must be at least 19 years of age.

**Personal Information:**

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Province: \_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact:**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Education:**

|  |  |  |  |
| --- | --- | --- | --- |
| Education | School Attended | Course of Study | Highest Level Completed |
| High School |  |  |  |
| Post Secondary |  |  |  |
| Other |  |  |  |

**Employment History:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Employer | Job Title | From | To | Reason for Leaving |
| 1. |  |  |  |  |
| 2. |  |  |  |  |
| 3. |  |  |  |  |

**Volunteer Experience:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Organization | Your Role | From | To | Reason for Leaving |
| 1. |  |  |  |  |
| 2. |  |  |  |  |

**Availability: (example 12:30pm to 3:30pm)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
|  |  |  |  |  |  |

1. How long of a commitment are you prepared to make?

□ 3 months □ 6 months □ 9 months □ 1 year □ ongoing

2. How often would you like to volunteer?

□ bi-weekly □ once a week □ more than once a week □ special events

3. Volunteer Area of Interest: Check off all areas you may be interested in

□ ARC Youth Drop in Centre □ Drop In Basketball

□ MRC Youth Drop in Centre □ Drop In Floor Hockey □ Training Courses □ Leadership Development

□ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Please list two references. References may be past or present employers, teachers,

volunteer supervisors, etc. We can only accept one personal reference and it CANNOT

be from a family member.

I hereby authorize the Abbotsford Youth Commission to contact the above references to establish my suitability as a volunteer.

Signature of Applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Office Use Only

Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Interviewed By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Interviewed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Police Check complete: □ yes □ no

Reference Checks complete: □ yes □ no