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| Office Use Only <i>Date Received:</i> _____ <i>Interview Completed:</i> _____ <i>Police Check Received:</i> _____ <i>Starting Date:</i> _____ |
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Shalom Manor & Gardens Volunteer Application Form

(please print)

| Personal Information | | | |
|----------------------|-------|----------|---------------------------|
| Name | | Date | |
| Street Address | | City | Postal Code |
| Phone Number | Email | | Date of Birth (year opt.) |
| Emergency Contact | | Relation | Phone Number |

| Educational Background | |
|--|---------------------------------|
| High School – indicate completed <input type="checkbox"/> Gr. 9 <input type="checkbox"/> Gr. 10 <input type="checkbox"/> Gr. 11 <input type="checkbox"/> Gr. 12 | Post Secondary – please specify |
| Other Certification Completed | Relevant Courses/Workshops |

| Work/Volunteer History | |
|--|--------------|
| #1 Employer | Position |
| Duties/Responsibilities | |
| Supervisor's Name & Title | Phone Number |
| #2 Employer | |
| #2 Employer | Position |
| Duties/Responsibilities | |
| Supervisor/s Name & Title | Phone Number |
| I authorize the Coordinator of Volunteers to contact the above references. | |
| <i>Signature:</i> _____ <i>Date:</i> _____ | |

Volunteerism Questions

Why are you interested in volunteering for Shalom Manor & Gardens?

Can you communicate in Dutch?

Yes No

If yes, can you:

Speak Write Understand

Have you ever been convicted of a criminal offence for which a pardon has not been granted?

Yes No

Are you willing to complete a Police Check? (successful applicants will be required to complete a Police Check)

Yes No

Availability

Please check all that apply

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|-----------|--------|---------|-----------|----------|--------|----------|--------|
| Morning | | | | | | | |
| Afternoon | | | | | | | |
| Evening | | | | | | | |

Areas of Interest

Administration

- Board Member
- Administrative Assistance
- Reception

Housekeeping/Laundry

- Sewing/mending
- Labeling
- Plant care/flower arranging

Dietary

- Baking/Cooking

Maintenance

- Projects

Nursing

- Mealtime Partner
- Mobility Assistance (OT/wheelchairs)
- Foot Care Porters

Recreation

- Breeze's Café
- Computers
- Crafts
- Friendly Visiting
- Games
- General Store
- Hair Setting
- Knitting
- Music
- Outings
- Portering
- Reading

Other:

I hereby certify that the facts set forth above are true and complete to the best of my knowledge. I understand that falsified statements on this application shall be considered sufficient cause for dismissal.

Signature: _____ Date: _____

Guardian/Parent Signature: _____ (if volunteer is under age 18)

Please forward this form to the Coordinator of Volunteers at Shalom Manor & Gardens.
Once your form is received, you will be contacted for an interview.