



*"That people live in dignity and share in all aspects of living in their community."*

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## **Volunteer Application Form**

### **Personal Data:**

Name: \_\_\_\_\_  
(First) (Last)

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

Phone Number(s) \_\_\_\_\_  
(Home) (Work)

The best time to contact me is \_\_\_\_\_, at my home # \_\_\_\_\_ and/or my work # \_\_\_\_\_

### **Previous Employment and/or Volunteer Experience:**

1. Please provide the Employer's name, address, phone number:

\_\_\_\_\_  
Dates Employed/Volunteered: \_\_\_\_\_  
Duties/Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

2. Please provide the Employer's name, address, phone number:

\_\_\_\_\_  
Dates Employed/Volunteered: \_\_\_\_\_  
Duties/Responsibilities: \_\_\_\_\_  
\_\_\_\_\_

### **References:**

Please list 3 references, work or personal, that we may contact:

1. Individual's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Relationship (ie. employer, co-worker, friend) \_\_\_\_\_

2. Individual's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Relationship (ie. employer, co-worker, friend) \_\_\_\_\_

3. Individual's Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Relationship (ie. employer, co-worker, friend) \_\_\_\_\_

I prefer to volunteer in the a.m. \_\_\_\_\_, p.m. \_\_\_\_\_, weekdays \_\_\_\_\_, weekends \_\_\_\_\_ and in the

Goderich area \_\_\_\_\_ and/or Clinton area \_\_\_\_\_. Frequency/Availability: \_\_\_\_\_

Date available to start: \_\_\_\_\_.

To assist us in matching you to a volunteer opportunity that is suitable, rewarding and fulfilling to you and which will enrich the life of an individual receiving support, we are interested in your skills, hobbies and special abilities you may have.

**Have you ever worked or assisted anyone who:**

is Physically Disabled \_\_\_\_\_ Has an Intellectual Disability \_\_\_\_\_

is Medically Fragile \_\_\_\_\_ Uses a Wheelchair \_\_\_\_\_

Uses alternate communicate styles: Sign Language \_\_\_\_\_

Facilitated communication \_\_\_\_\_

Bliss, Sign Board or Sound Board \_\_\_\_\_

Other: \_\_\_\_\_

**Activities/Sports/Hobbies:**

Please put a mark beside the activities that are of interest to you, either as a spectator (S) or participant (P).

Baseball \_\_\_\_\_ Billiards \_\_\_\_\_ Bowling \_\_\_\_\_ Theatre \_\_\_\_\_

Darts \_\_\_\_\_ Hockey \_\_\_\_\_ Golf \_\_\_\_\_ Curling \_\_\_\_\_

Walking \_\_\_\_\_ Bicycling \_\_\_\_\_ Soccer \_\_\_\_\_ Bingo \_\_\_\_\_

Dancing \_\_\_\_\_ Swimming \_\_\_\_\_ Aerobics \_\_\_\_\_ Singing \_\_\_\_\_

Woodworking \_\_\_\_\_ Cooking \_\_\_\_\_ Church \_\_\_\_\_ Clubs \_\_\_\_\_

Going to the Library \_\_\_\_\_ Weight Training \_\_\_\_\_

Horse-back Riding \_\_\_\_\_ Listen to Music \_\_\_\_\_

Going out for Coffee \_\_\_\_\_

Going to the Movies \_\_\_\_\_ Playing a Musical Instrument \_\_\_\_\_

Doing Crafts (specify) \_\_\_\_\_

Playing Games (ie. cards, board games, checkers, etc.) \_\_\_\_\_

Other: \_\_\_\_\_

**Other:**

What are your personal reasons for volunteering? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you possess any licences, certificates, degrees? (Please describe) \_\_\_\_\_  
\_\_\_\_\_

Is there anything else you would like to add? (skills, interests, hobbies or special abilities)? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**You will be required to obtain** a Police Record Search before you begin your assignment and should you use your own vehicle or Agency vehicle, you must provide proof of Third Party Liability Insurance, minimum of one million dollars and your driver's licence number.

I certify that to the best of my knowledge, the information given on this application is correct and complete.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Thank you for completing this application form, we appreciate your interest in our Agency.**