

Chatham Kent Women's Centre Volunteer Application Form

Thank you for your interest in volunteering at the Chatham Kent Women's Centre. The following information will assist us in determining your interests and skills for a prospective volunteer position, and provide other information required for administrative purposes.

Personal Information Please print all information clearly.				
Mr.□ Mrs.□ Miss□ Ms.□ Name:				
Address: Number and Street	Postal Code	Town/City		
Telephone numbers: Residential	Cell	Business		
E-mail:				
Contact preference: Email□ Phone□ Other□				

Work and Volunteer Experience (Please attach your resume if available)

Please describe your three most recent volunteer and employment experiences.

Period of	Organization Name	Address	Responsibilities
Volunteering/			
Employment			

Skills, Interests, and Talents
Please list your skills, interests, qualifications which you feel are relevant (e.g. languages written and spoken, arts and crafts, childcare, filing, computer skills, fundraising, etc.)

General Information

How did you hear about the Chatham Kent Women's Centre?

Have you volunteered with Chatham Kent Women's Centre in the past? (Please check appropriate box) o

If yes, please indicate in what capacity you volunteered and who you reported to:

Why do you want to volunteer at the Women's Centre (i.e. school requirements, desire to help others, gain work-related experience etc.)?

Availability

Please fill in the times you are available to volunteer:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
AM							
PM							

Jobs interested in:	
□Bingo Worker □Board of Director □Childcare □Reception □Donation Sorting □Language Interpreters When are you available to start volunteering?	□Wellness/Self Care Programming □Gardening □Special events/ Fundraising □Moving Clients □Data Input □Children's Activities
Please indicate your desired length of voluntee	er period (e.g. 6 months 1 year, etc.)
How many hours per week do you want to vo	lunteer?
References:	

Please provide the Women's Centre with three references that a staff member can contact. Please note that family members are not eligible to provide references. Suggested references: Employer, professor/teacher, doctor, lawyer, or pastor etc.

Name	Title	Relationship to You	Phone Number and Address

In recognition of the trust inherent in serving children and vulnerable adults and to fulfill the requirements of the Chatham Kent Women's Centre, a police records check will be required prior to the acceptance of an individual as a volunteer of the Women's Centre.

I hereby give permission to Chatham Kent Women's Centre to check the provided references and to conduct a criminal record check. I understand that volunteer placement is conditional upon receipt of satisfactory references and police check. I declare that the information provided in the application is true and accurate.

Signature of Applicant	Date

The Chatham Kent Women's Centre respects your privacy and adheres to all legislative requirements with respect to protecting privacy. Your personal information will be used for the volunteer application process and related program purposes such as notification about recognition events. From time to time, Chatham Kent Women's Centre may contact you about upcoming programs, special events and fundraising opportunities.

Please mail or fax your completed form to:

Chatham Kent Women's Centre Attention: Janet Cunningham 20 Sandys Street Chatham ON N7L 4Y5 Fax 519-354-6038

Sincerely,

Janet Cunningham Special Events /Volunteer Coordinator Phone: 519-351-9145 ext 226

Fax: 519-354-6038 janetcu@ckwc.org