



VOLUNTEER APPLICATION FORM

All information gathered will be kept confidential and will be used only by Phoenix Youth Programs. Phoenix Youth Programs adheres to and complies with the provisions under Nova Scotia's Human Rights Act.

GENERAL INFORMATION

Last Name: _____ First Name or Initials: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Home Telephone: _____ Cell Phone Number: _____

Business Telephone (if we can contact you there): _____

Email Address: _____

I understand that in order to work directly with youth I must be at least 19 years old. I also understand that if I am under 19 I must have the written consent of my parent or guardian.

I confirm that I am at least 19 years old.

Have you ever been an employee, a volunteer or a client with Phoenix Youth Programs?

no

yes (please check all that apply) an employee a volunteer a client

APPLICANT PROFILE QUESTIONS

1. Describe your interest in volunteering with Phoenix Youth Programs.

2. From your perspective, what are the challenges facing at-risk or homeless youth?

3. Describe any of your life and work experiences, skills, training or personal qualities that you believe have prepared you to volunteer with Phoenix Youth Programs.

4. Describe your hobbies and interests.

5. Have you ever been convicted of any offence for which you have not been pardoned? If so, please explain to help us evaluate your candidacy as a volunteer.

6. Can you provide a resume? Yes No

If yes, please include. If not, please provide a list of your volunteer/work experience:

7. How did you hear about Phoenix Youth Programs (check all that apply)?

- | | | | |
|-------------------------------------|--|--|--|
| <input type="checkbox"/> Radio | <input type="checkbox"/> Volunteer Centre | <input type="checkbox"/> Poster/Flyer | <input type="checkbox"/> Staff |
| <input type="checkbox"/> Television | <input type="checkbox"/> Display | <input type="checkbox"/> Another Volunteer | <input type="checkbox"/> Friend/Relative |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> School/College/University | <input type="checkbox"/> Public Event | <input type="checkbox"/> Internet |
| <input type="checkbox"/> Church | <input type="checkbox"/> Work | <input type="checkbox"/> Other (please specify): | |

8. Indicate the type of volunteer work that interests you (check all that apply).

- | | | |
|---|--|--|
| <input type="checkbox"/> Involvement with youth | <input type="checkbox"/> Working Special Events | <input type="checkbox"/> Office support |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Public Education Displays | <input type="checkbox"/> Computers |
| <input type="checkbox"/> Public relations | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Training/facilitation |
| <input type="checkbox"/> Projects/research | <input type="checkbox"/> Maintenance | <input type="checkbox"/> Other (please specify): |

9. What skills do you have that you would particularly like to use in your volunteer role?

10. How often would you like to volunteer?

- Once or twice weekly Occasionally Projects Other (please specify):

11. General availability:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
After 6 pm							

REFERENCES

Any combination: professional - present or former employers/volunteer agencies; academic - from an educational program; character - someone who has known you for at least 1 year.

Name:

Telephone Number:

Relationship to You:

Name:

Telephone Number:

Relationship to You:

Name:

Telephone Number:

Relationship to You:

I certify that the information in this application is, to the best of my knowledge, correct and complete. I give my permission to Phoenix Youth Programs to contact the above references.

Signature of applicant

Date

Parental/guardian consent for applicants under 19 years of age.

I, the undersigned, give my permission for my child/ward to volunteer with Phoenix Youth Programs.

Signature of parent/guardian

Printed name of parent/guardian

Date

Please return to: Reshmu George, Coordinator
Volunteer and Student Placement Programs
2385 Hunter St.
Halifax NS B3K 4V7
Tel: (902) 405-3198 Fax: (902) 422-9595
Email: rgeorge@phoenixyouth.ca

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