



VOLUNTEER APPLICATION

Personal Data			
Name			
No.	Street	City	Home Tel.
Province	Postal Code	E-mail	Alternate Tel.
Are you legally entitled to accept employment in Canada on a permanent basis? Yes <input type="checkbox"/> No <input type="checkbox"/>		Are you 16+ years of age Yes <input type="checkbox"/> No <input type="checkbox"/>	

To determine your qualification for volunteering, please provide below and on the reverse, information related to your academic and other achievements including voluntary work, as well as employment history. Additional information may be attached on a separate sheet.

<p>I hereby declare that the foregoing information is true, complete and correct. I understand that a false statement would disqualify me from volunteering.</p> <p>I understand that this and other personal information about me will be collected, used and retained and may be disclosed to third parties by The Centre for DREAMS in connection with its assessment of this application, including checking reference, and verifying information.</p> <p>I hereby permit The Centre for DREAMS to contact the above-mentioned persons named as references in order to obtain information as to personal/employment history and volunteer experience.</p>	
_____	_____
Signature of applicant	Date

Office Use Only
Interview date: _____
Interview Completed by: _____
Police Check received: _____
Placement: _____
Placement Days: _____
Start date: _____
Termination date: _____
No. of hours completed: _____

Notes