



*Happy children, strong families, connected community since 1978*

<b>VOLUNTEER APPLICATION FORM</b>	
<b>Date:</b>	<b>Driver's License:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Name:</b>	<b>Telephone:</b>
<b>Address:</b>	
<b>Email:</b>	
<b>Contact person in case of emergency:</b>	
<b>Telephone:</b>	<b>Spoken languages:</b>
<b>Written languages:</b>	
<b>Previous volunteer / work experiences (include name of organization, tasks, age groups, how long were you there, etc):</b>	
<b>Personal goals and expectations that you hope to gain from volunteering at Marpole Oakridge Family Place:</b>	
<b>What special skills and talents do you want to bring to Marpole Oakridge Family Place?</b>	
<b>What days and times are you available for volunteering?</b>	
<input type="checkbox"/> Monday _____	<input type="checkbox"/> Friday _____
<input type="checkbox"/> Tuesday _____	<input type="checkbox"/> Saturday _____
<input type="checkbox"/> Wednesday _____	<input type="checkbox"/> Sunday _____
<input type="checkbox"/> Thursday _____	

**How long can you volunteer for?**

- 3 months    6 months    Other \_\_\_\_\_

**Do you have any health problems or physical limitations that you would like us to know about that may affect your volunteer participation? For example, allergies, back problems, etc.**

**Please check the following activities that you enjoy or would like to gain experience in:**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Arts and Crafts             | <input type="checkbox"/> Puppet Show             | <input type="checkbox"/> Photography            |
| <input type="checkbox"/> Leading a Sing-a-Long       | <input type="checkbox"/> Cooking                 | <input type="checkbox"/> Translator             |
| <input type="checkbox"/> Playing Musical Instruments | <input type="checkbox"/> Cleaning                | <input type="checkbox"/> Administrative Support |
| <input type="checkbox"/> Planning Special Events     | <input type="checkbox"/> Organizing              | <input type="checkbox"/> Gardening              |
| <input type="checkbox"/> Storytelling                | <input type="checkbox"/> Computer Work           | <input type="checkbox"/> Marketing              |
| <input type="checkbox"/> Engaging with Children      | <input type="checkbox"/> Volunteer Co-Ordination | <input type="checkbox"/> Fundraising            |
| <input type="checkbox"/> Program Facilitation        | <input type="checkbox"/> Workshops Guest Speaker | <input type="checkbox"/> Other                  |

**How did you find out about our volunteer position? Eg. friend/website/our programs/social media**