



Volunteer Opportunities Application

| | | | |
|------------------|--------------|--|--------------|
| Name: _____ | | | |
| Current Address: | | Alternate Address: (for summer, etc..) | |
| | | | |
| | | | |
| City: | Postal Code: | City: | Postal Code: |
| Phone: | | Phone: | |
| Work Phone: | | | |
| Cell Phone: | | | |
| Email Address: | | | |

PLEASE ✓ THE PROGRAMS YOU ARE INTERESTED IN:

| | |
|---|--|
| <input type="checkbox"/> Childcare Volunteer | <input type="checkbox"/> Youth Involvement Kingston |
| <input type="checkbox"/> Community Friend | <input type="checkbox"/> Other (i.e. administrative work): |
| <input type="checkbox"/> Community Options Volunteer | _____ |
| <i>Recreation Volunteer</i> <input type="checkbox"/> | _____ |
| <i>Educational Tutor</i> <input type="checkbox"/> | |
| <i>Life Skills Volunteer</i> <input type="checkbox"/> | |
| <i>Volunteer Guide</i> <input type="checkbox"/> | |

HOW DID YOU HEAR ABOUT OUR VOLUNTEER OPPORTUNITIES?

| | | |
|--|--------------------------------------|--|
| <input type="checkbox"/> Someone I know | <input type="checkbox"/> Website | <input type="checkbox"/> Newspaper Article |
| <input type="checkbox"/> Newspaper Ad | <input type="checkbox"/> Flyer | <input type="checkbox"/> Volunteer Centre |
| <input type="checkbox"/> Queens University | <input type="checkbox"/> Other _____ | |

Please answer the following questions as thoroughly as possible:

➤ **Why would you like to volunteer for Community Living Kingston?**

➤ **Do you have any previous personal, work, or volunteer experience with people who have intellectual disabilities? If yes please describe your experience.**

➤ **Please describe your personal qualities, training or skills that you feel enable you to provide support to someone who has an intellectual disability?**

➤ **Have you ever volunteered before? If so, please indicate where you volunteered and the tasks you were responsible for.**

PLEASE SELECT YOUR PREFERENCES(if any):

I would like to volunteer with:

Children Youths Adults Seniors

I would prefer to work with:

A Male A Female Doesn't Matter

Do you have any other preferences regarding the person that you are matched with? _____

PLEASE LIST THE DAYS AND TIMES, AS ACCURATELY AS POSSIBLE, WHEN YOU ARE AVAILABLE FOR VOLUNTEER WORK: (example: Monday 2-4 p.m.)

| | SUN | MON | TUES | WED | THUR | FRI | SAT |
|-----------|-----|-----|------|-----|------|-----|-----|
| morning | | | | | | | |
| afternoon | | | | | | | |
| evening | | | | | | | |

Other information we may need to know about your availability:

➤ **Could you have the use of a car for your volunteer work?**

Yes No

➤ **If you will be using a car, do you have a valid driver's licence?**

Yes No

➤ **Are you willing to use public transit for your volunteer work?**

Yes No

➤ **What are some of the activities you presently enjoy? What clubs/groups do you belong to?**

➤ **Are there any activities that you have never tried before but would like an opportunity to try?**

➤ **Are there any activities / groups / clubs that you've tried or belonged to in the past?**

..... some examples of activities might include

| | | | | | | |
|---------------|----------------|----------|-------------|-----------|-------------------|----------|
| arts & crafts | roller blading | swimming | woodworking | gardening | | |
| puzzles | biking | bingo | movies | theatre | church activities | dancing |
| skating | computers | drama | music | animals | games | reading |
| shopping | sewing | sports | boating | skiing | hiking | aerobics |

Please provide the following information for three references that we may contact. At least one must be an employment, volunteer and/or educational reference.

Name _____

Occupation: _____ Phone : (_____) _____

Email Address: _____

What is your relationship with this reference? _____

How long have you known this reference? _____

What is the best way/time to contact this person? _____

Name _____

Occupation: _____ Phone : (_____) _____

Email Address: _____

What is your relationship with this reference? _____

How long have you known this reference? _____

What is the best way/time to contact this person? _____

Name _____

Occupation: _____ Phone : (_____) _____

Email Address: _____

What is your relationship with this reference? _____

How long have you known this reference? _____

What is the best way/time to contact this person? _____
