

VOLUNTEER APPLICATION FORM

SECTION 1: VOLUNTEER INFORMATION

NAME: _____ **EMAIL:** _____

PHONE: _____ (Home) _____ (Cell)

Mailing Address:

Closest Intersection:

Emergency Contact: _____

Phone: _____ (Home) _____ (Cell)

Languages Spoken:

() English () French Other: _____

SECTION 2: VOLUNTEER ASSESSMENT

Volunteer Experience: _____

Relevant training/experience: _____

Volunteer Interest:

How did you hear about the Elder Abuse Education Program? _____

What appeals to you about volunteering with this Program? _____

Do you have a geographic preference for where you volunteer? (Yes) _____ (No) _____

If yes, where? _____

Volunteer Availability:

How much time would you like to contribute to the Elder Abuse Education Program? (eg. Hours per week or month)

What days/times are best for you? _____

SECTION 3: CHARACTER REFERENCES and POLICE RECORDS CHECK

To ensure the safety of our clients, we ask all potential volunteers to provide two character references, from people who are not related to you.

A Vulnerable Sector Police Clearance check is also required.

Would you be willing to complete this process? () yes () no

Reference # 1: _____

Organization/Title (if applicable): _____

Address (if applicable): _____

Day Time Phone: _____

Reference # 2: _____

Organization/Title (if applicable): _____

Address (if applicable): _____

Day Time Phone: _____

SECTION 4: AUTHORIZATION

The information provided through the volunteer application and approval process is confidential and will be used only for the administration of your application and resulting volunteer work with the Elder Abuse Education Project. Your completion and signature of this application form authorizes us to contact your references.

Signature of Applicant

Date

Thank you for your interest in the Elder Abuse Education Program! We will contact you in the near future and look forward to meeting you. If you know of a friend or relative who may be interested in volunteering with us, please let them know about this program.

Please return completed Application Form to:

Leslie Bubeloff, Coordinator
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