



Contact Information

Name: _____ Date: _____

Phone: (Home) _____ (Cell) _____

(Work) _____ (Other) _____

Address: _____

City: _____ Postal Code: _____

Emergency Contact: _____ Phone: _____

May we contact you at work? Yes No

How did you hear about us? _____

About You!

What type of Volunteer '*experience*' are you looking for? _____

Is there a particular type of Volunteer work or activity you are interested in? _____

Current Occupation/Past Time: _____

Your Special Skills or Training: _____

Your Hobbies & Interests: _____

Is there a person or group with whom you are particularly interested in working? (Check all that apply)

Male Female Either

Adults Seniors Teens No Preference Other: _____

At what times are you interested in volunteering?

Flexible Weekdays Evening Weekends Other _____

There are times I cannot Volunteer: _____

Do you have a geographic preference as to where you do Volunteer work?

No Yes Where: _____

Do you have access to an automobile you can use for Volunteer work?

No Yes Occasionally

Do you have any medical conditions of which we should be aware of? (i.e. allergies, back problems, etc.)

No Yes Please specify: _____



Do you have questions or concerns about being a Volunteer that you would like to discuss in person?

No Yes Please call me Comments: _____

When is the best time to set up a meeting to discuss Volunteer opportunities that may be right for you?

**A Criminal Reference Check is required for every Volunteer.
You will be reimbursed the \$5.00 fee upon submission of receipt.**

Thank you for your interest in our Volunteer Program

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Additional Notes