



SIMCOE COMMUNITY SERVICES

39 Fraser Court, Barrie, ON L4N 5J5

VOLUNTEER APPLICATION FORM

***Note:** All information supplied to us remains confidential to employees of the Agency and is not disclosed without your permission.

MS/MISS/MRS/MR: _____
(Surname) (First Name) (Middle Name)

HOME ADDRESS: _____
_____ **Postal Code:** _____

TELEPHONE NO.: _____
(Home) (Business)

DATE OF BIRTH: _____ **E-mail Address:** _____
(Day / Month)

WORK EXPERIENCE:
EDUCATION:
SPECIAL COURSES:
VOLUNTEER EXPERIENCE:
REASONS FOR VOLUNTEERING:
INTERESTS / HOBBIES:
NAME 3 THINGS THAT YOU REALLY ENJOY DOING:
NAME SOMETHING YOU DON'T WANT TO DO:

Have you had previous contact with this Agency?
What age group would you like to work with: Child Teenager Adult Wherever Needed
Do you have access to a vehicle:
Would you be able to act as a volunteer driver:
Languages spoken other than English:
Could you be called upon to be an occasional event/outing volunteer:

PLEASE INDICATE WHAT DAYS & TIMES ARE MOST CONVENIENT FOR YOU TO VOLUNTEER:

WEEKDAY	MON	TUES	WED	THUR	FRI	SAT	SUN
MORNING							
AFTERNOON							
EVENING							

EMERGENCY INFORMATION:

Name: _____ Telephone Number: _____

REFERENCES

Please list two (2) people, other than family members, for references:

A satisfactory Criminal Reference Check will be required.

NAME	EMAIL ADDRESS	PHONE NUMBER

DATE

SIGNATURE