



VOLUNTEER APPLICATION FORM

Contact Information				
Name Street Address City - Postal Code Home Phone Work Phone E-Mail Address Availability	vailable for volunteer assignment Thursday Friday	ss? Sunday Other		
Wednesday	Saturday	other		
Interests				
Tell us in which areas you are Administration Events Field work Fundraising Deliveries Phone bank Marketing Newsletter production Volunteer coordination Other - Specify:				
Special Skills or Qualificat				
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.				
[Version -Jan 2015]				





Previous Volunteer Experience				
Summarize your previous volunteer experience – Feel free to attach a resume with this application				
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Person to Notify in Case of	Telliergency			
Name Street Address				
City - Postal Code				
Home Phone				
Work Phone				
E-Mail Address				
Agreement and Signature				
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand				
-	•	tement, omissions, or other misrepresentations mad	le	
by me on this application may	result in my immed	diate dismissal.		
Name (printed)				
Signature				
Date				
Applicants under the age	of majority must h	have a parent/guardian fill out the following:		
		lent's decision to volunteer with CALA		
Name:	r enna, regar depend	ient 3 decision to volunteer with 67 th		
Relationship to Applicant:				
Telephone Number:				
Parent/Guardian Signature		Date (DD/MM/YYYY)		
		·		
☐ By checking this box I certify that the information in this form is correct and complete. I give my permission to the Canadian Latin American Association to obtain, if required, a criminal record check and/or a driver's abstract. I understand that I will be				
		s abstract or other program specific checks may be required.		
Our Policy				
It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.				
Thank you for completing this application form and for your interest in volunteering with us.				
D/ : 1 00453				
[Version - Jan 2015]				