

# VOLUNTEER INFORMATION SUMMARY

**Name of Volunteer:** \_\_\_\_\_  
(First) (Initial) (Last)

**Address:** \_\_\_\_\_  
(Street number and Street name)

\_\_\_\_\_  
(City) (Province) (Postal Code)

**Telephone Number:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_  
(Name and Number)

Please indicate which opportunities interest you:

- |   |  |
|---|--|
| <input type="checkbox"/> Administration         | <input type="checkbox"/> Grocery Shopping        |
| <input type="checkbox"/> Board or Directors     | <input type="checkbox"/> Community Event Support |
| <input type="checkbox"/> Stewardship Ambassador | <input type="checkbox"/> Professional Services   |

Other opportunity: \_\_\_\_\_

- |   |                                   |
|---|-----------------------------------|
| <input type="checkbox"/> I have read and understood the Confidentiality Agreement | <b>Volunteer Signature:</b> _____ |
| <input type="checkbox"/> I have read and understood Conflict of Interest          | <b>Volunteer Signature:</b> _____ |

**Please give the names and contact information for two references:  
(preferably someone with whom you have worked or volunteered)**

- 1. Name:** \_\_\_\_\_  
**Email Address (preferable)** \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
How do you know this person? \_\_\_\_\_
- 2. Name:** \_\_\_\_\_  
**Email Address (preferable)** \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
How do you know this person? \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Application Received: \_\_\_\_\_  
Contact Date: \_\_\_\_\_  
Interview Date: \_\_\_\_\_