



VOLUNTEER APPLICATION

Welcome to Family Centre! For 30 years, volunteers have been a valuable resource for our participants and staff. By volunteering, you'll not only help your fellow citizens but also strengthen our workplace and promote community involvement. As a volunteer you are a valuable human resource that warrants support and encouragement to develop your skills and ensure your involvement in supporting families in southern Alberta.

Name: _____ Birthdate: _____

Address: _____ Postal Code: _____

Phone: Primary: # _____ Alt: # _____

E-mail Address: _____
(Will be added to our volunteer mailing list)

Do you need Guardian Permission? Yes No

Volunteer Experience: (most recent and longest worked)

Volunteering is rewarding. Please share what you hope to get out of this experience.

Please indicate what times you may be available: Mornings between 9 -12, afternoon between 12-4, and evenings between 4-8.

Weekday: Mornings: _____ Afternoons: _____ Evenings: _____ Weekends: _____

There are many volunteer opportunities available at Family Centre. Please indicate any activities you may be interested in:

____ Youth Programming: Worry Dragons

- ___ Parent Education: Parenting after Separation (PAS), Focus on Communication in Separation (FOCIS), Parenting for New Canadians, Stepping Stones, Positive Parenting Program (Triple P)
- ___ Family Support: Supporting Father Involvement (SFI), Building Families that Thrive
- ___ Early Childhood Education: Parents and Children Together (PACT), Me and My Dad, the Interfaith Chinook Country Kitchen
- ___ Internship: Serving Communities Internship Program, College Practicum, Service learning
- ___ Events: Santa Photos, Mc Happy Day, FC Family Fun Night, Pancake Breakfast and Boo Bash
- ___ Clerical Support: Folding Envelopes, Creative Materials, Data Entry
- ___ Child Care: Family Support Programs
- ___ Board of Directors
- ___ Parent Advisory Committee

I agree that you may keep my personal information on file while I am a volunteer and up to three years after my last volunteer assignment.

Date of Application: _____ Signature of Volunteer: _____

Office Use:

| | |
|------------------------|-----|
| Entered in Gift Works | / / |
| Record checks received | / / |

Record Checks: (Should be within one year)

Criminal Record/Vulnerable Sector Check: _____ Date: _____

Child Intervention Check: _____ Date: _____