



Volunteer Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City Province ZIP Code

Phone: _____ Email _____

Do you have a criminal background check? YES NO If not, are you willing to provide one? YES NO

Area(s) of Interest

- Driver (Assisting in moving residents and belongings, access to van/SUV) General Volunteer :)
- Start-up kit packaging (once per month)
- Snow Shovellor (clearing driveway/backyard, morning/evening of a snowfall)

Commitment Level

- Less than 6 months 6 months to 1 year Ongoing
- Other (please explain)

Availability

	<i>Morning</i>	<i>Afternoon</i>	<i>Evening</i>
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Saturday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sunday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Why do you want to volunteer for Adam House?

How did you hear about the volunteer program at Adam House?

<input type="checkbox"/> Volunteer Centre	<input type="checkbox"/> Internet	<input type="checkbox"/> School
<input type="checkbox"/> Friend/ relative	<input type="checkbox"/> Public Event	<input type="checkbox"/> Another Volunteer
<input type="checkbox"/> Other:		

Signature

Signature: _____ Date: _____