**Volunteer Application Form**

**General Information**

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| **First Name:** | **Last Name:** | |
| **Address:** | **City:** | **Postal Code:** |
| **Home Phone:** | **Work Phone:** | |
| **Email:** | **Date of Birth:** | |
| **Emergency Contact:** | **Phone:** | **Relationship:** |
| **Date:** | | |

**Education Background**

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**Employment Background (if applicable)**

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**Hobbies, Interests, and Skills**

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**Previous Volunteer Experience**

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**How did you learn about the Alzheimer Society?**

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| --- | --- |
| * Website/Internet (e-mail blasts, e- newsletters,…) * Friend/family/colleague * Media (TV, radio, newspaper) | * At a special event * Materials displayed in my community * Direct mail * Other |

**Areas of Interest:***Please note not all opportunities are available at all Societies:*

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| **Leadership/Committees** □ Board of Directors participation□ Volunteer development/coordination□ Sharing your professional/leadership skills  **Client Support** □ Providing direct support (day programs, one-to-one group support, drivers, companions)  **Education** □ Promoting community education (outreach, education and awareness, speakers’ bureau)  **Special Events** □ Event Planning and Committees□ Coffee Break, Walk for Memories | **Advocacy** □ Advocating for better government policies (work with community and public officials)  **Marketing & Communications**  □ Writing, editing skills / graphic art skills / website, social media  **Office Support** □ Reception (Business administration, accounting, data entry, computer skills) **Other** □ Student placement□ Not sure which opportunity is right for me □ Please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Availability**Please check all that apply

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| **Day/time** | **MON** | **TUE** | **WED** | **THUR** | **FRI** | **SAT** | **SUN** |
| **Morning** |  |  |  |  |  |  |  |
| **Afternoon** |  |  |  |  |  |  |  |
| **Evening** |  |  |  |  |  |  |  |

**List names and phone numbers of two personal references**

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Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
(*Volunteer applicant*)

Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
*Please note: A parent /guardian must also sign for volunteers under 18 years of age.*

Thank you for completing this form. Applicants will be contacted to discuss suitability and current opportunities.