**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
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**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.