



Welland Heritage Council
and Multicultural Centre

Volunteer Application Form

Name: _____ Date of Birth: _____

Address: _____

Phone: _____ E-mail: _____

◆ Why have chosen to volunteer your time with the Welland Heritage Council?

◆ For our information, how did you learn about our volunteer program?

Skills & Interests

Current Occupation:

**Education
Background:**

Language(s):

Spoken: _____

Written: _____

**Hobbies,
Interests, Skills:**

**Previous Volunteer
Experiences:**

References

Please list name, address and phone numbers of two personal references:

Name: _____ Phone: _____

Address: _____

Relationship to you: _____

Name: _____ Phone: _____

Address: _____

Relationship to you: _____

Availability

	Mon	Tue	Wed	Thurs	Fri	Sat	Sun
Mornings							
Afternoons							
Evenings							

◆ How many days per week are you willing to volunteer? _____

◆ How many hours per day are you willing to volunteer? _____

- ◆ **All volunteers are required to provide an original Criminal Record Check that is satisfactory to the Operations Manager or Executive Director. Any cost related to obtaining the Criminal Record Check is initially the sole responsibility of the applicant; the volunteer will be reimbursed providing the results are acceptable.**

Please sign and date this form. All information will be kept confidential.

Name: _____

Date: _____