

Volunteer Application

400 King St. W, PO Box 1003, Hamilton, Ontario L8N 3R1
Tel: 905 528 6565 ext. 3333 Fax: 905.528.6967
Email: volunteer@gsch.ca
Web: www.goodshepherdcentres.ca



Please Print:

1. Name: _____
Address: _____ Apt _____ City _____ Postal Code _____
Phone #: Home: _____ Cell: _____ Work: _____
Email: _____
2. Emergency Contact: _____ Relationship: _____
Phone Number: _____
3. What is your reason for wanting to volunteer?
 Spare time Explore career opportunities Personal satisfaction
 Work related Develop skills Desire to help others
 School requirement Community involvement Other _____
4. Why have you chosen to volunteer at Good Shepherd? _____

5. How did you learn about volunteering at Good Shepherd? Check all that apply.
 Social media Volunteer centre Poster Friend Church
 Website Newsletter/mailling Special event Another volunteer
 other _____
6. What is the highest level of education you completed (optional): _____
Name of School: _____
7. Have you ever used the services or programs of Good Shepherd? Yes No
If so, where? _____ When? _____
8. Have you ever been employed by Good Shepherd. Yes ___ No ___ Program _____ Year _____
9. Are you currently employed? Yes No Student
If employed – Employer: _____ PT FT
Primary duties: _____
10. Are you currently volunteering? Yes No Where? _____
How long? _____ Duties: _____

11. Past volunteer experience:

Year started	Length of service	Organization	Position

12. Languages spoken fluently other than English: _____

13. Hobbies or skills: _____

14. Please list the Centre(s) or position(s) you are interested in (i.e. Women’s Services, Family Centre or Child Minding, Cooking, etc.) _____

15. What time commitment are you looking for? (please circle) 8-12 months, 1 year plus, other _____

16. Are you 13 - 15 years of age? Yes No
 Are you 16 - 18 years of age? Yes No
 Are you 19 - 20 years of age? Yes No
 Are you 21 years of age and over? Yes No

17. When is your available Volunteer time?
 Daytime Yes No
 Evenings (after 6 p.m.) Yes No
 Weekends (days, evenings) Yes No

18. Personal References
 Please provide and attach two reference letters or Good Shepherd reference forms.
 (Please do not use relatives as references)

Declaration of Accuracy of Information and release of Information authorization

TO WHOM IT MAY CONCERN:

I hereby, certify that the facts set forth in the above Volunteer Application are true and complete to the best of my knowledge. I understand that if placed, falsified statements on this Application Form may disqualify me from my volunteer involvement or become just cause for my dismissal and there shall not be any claims made against Good Shepherd or any further legal obligation placed on Good Shepherd as a result of having taken such action. This further authorizes Good Shepherd to make any inquiries usually required to determine my suitability for volunteer placement as well as to contact any references and/or others to release to Good Shepherd any information which will assist Good Shepherd to determine my suitability for volunteer placement. I acknowledge and accept that this application does not guarantee acceptance into the program, and that Good Shepherd is under no obligation to accept or assign me as a volunteer in their program, and is not obliged to provide a reason.

Date: _____ Signature of applicant: _____

Signature of parent/guardian (if under 16) _____

Good Shepherd

Volunteer Permission and Release Form

I hereby authorize Good Shepherd to contact any or all of the references submitted for the purposes of processing my application to become a volunteer at one of the Good Shepherd Centres. I understand that these references will be contacted in confidence. I hereby waive the right to request disclosure of the personal references given about me. Good Shepherd reserves the right to request more references.

I further authorize the Police Department to release information to Good Shepherd in order to consider my application to volunteer in the programs of Good Shepherd, on the understanding that such information will be held in strict confidence.

I acknowledge and accept that this application does not guarantee acceptance into the program, and that Good Shepherd is under no obligation to accept or assign me as a volunteer in their program, and is not obliged to provide a reason.

I hereby release and forever discharge Good Shepherd, and their employees, directors and volunteers from any cause of action or claim for damages, whether bodily injury, death, property damage, or emotional trauma, anxiety or distress arising from my association with Good Shepherd.

I give permission to the Good Shepherd Volunteer Department to release pertinent information regarding my file to the Director or Program Coordinator/Supervisor of the program to which I am applying to in order to be considered for acceptance into the program.

I understand this application and subsequent information in my file is the property of Good Shepherd.

I understand the implications of this waiver and consent to them. I further agree that this waiver is made of my own free will and without duress.

Printed Name

Signature of Applicant

Date