



Grande Prairie & District Grief Support Association.

10031 103 Ave

Grande Prairie, AB, T8V 2N9

Phone: 780-539-5432

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VOLUNTEER APPLICATION FORM

GENERAL INFORMATION:

1. Full Name:

First

Middle

Last

2. Home Address:

Street

City/Town

Postal Code

3. Home Phone: _____ Work Phone: _____ Cell: _____

4. Are you over the age of 18? Yes / No

5. Do you drive? Yes / No

EMPLOYMENT INFORMATION:

6. Are you currently employed? Yes / No Occupation: _____

7. How long have you held your current job? _____

8. Name of Company: _____

9. Position: _____ Supervisor: _____

EDUCATION:

10. What is your highest level of education? _____

11. Are you currently a student? Yes / No If yes, describe: _____

SPECIAL TRAINING:

12. Please list any special courses/skills/interests/hobbies you have that may apply to camp.

13. Please list any other agencies you've volunteered with and in what capacity.

14. Have you ever been terminated or been asked to resign from a volunteer position? If so, please explain.

OTHER:

15. Describe the strengths you will bring to this program.

16. Do you have any physical limitations which might affect your ability to perform your duties? Yes / No If yes, please describe:

17. Please tell us why you wish to volunteer for this program.

REFERENCES:

The following questions are asked of you as there are certain criminal offences which may not allow you to participate in certain areas of volunteering.

18. Have you ever been charged with a criminal offense? Yes / No

19. Have you ever been convicted of a criminal offense? Yes / No

The above information is accurate and correct to the best of my knowledge. I understand that any false information I have provided above will result in the rejection of my application and that any information provided may be verified prior to being accepted into the program.

Signature: _____ Date: _____

Opportunities for volunteers are provided without regard to religion, creed, race, national origin, age, or sex.