



*The information you provide will be kept strictly personal and confidential*

### Volunteer Application Form

**Full Name:** \_\_\_\_\_ **Date of Birth:** \_\_\_\_\_  
*First Last dd/mm/yyyy*

**Address:** \_\_\_\_\_  
*Street Address Apartment/Unit #*  
\_\_\_\_\_  
*City State ZIP Code*

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

<b>Emergency Contact Person:</b>	
<b>Relationship:</b>	
<b>Emergency Phone Number:</b>	

**Do you speak any languages other than English?** (specify)  
**Do you hold valid driver's Licence?** Yes  No  Licence Class:  
**Do you have your own transportation?** Yes  No

### Personal Experience

**How did you learn about volunteer opportunities at the Friends in Need Food Bank?**  
\_\_\_\_\_  
\_\_\_\_\_

**Why do you want to volunteer with Friends in Need Food Bank?**  
\_\_\_\_\_  
\_\_\_\_\_

**What past volunteer experience do you have?**  
\_\_\_\_\_  
\_\_\_\_\_

**What did you enjoy most and least about past volunteer experiences?**  
\_\_\_\_\_  
\_\_\_\_\_

**What personal experience would you bring to the Friends in Need Food Bank as a volunteer?**  
\_\_\_\_\_  
\_\_\_\_\_

## Client Services / Medical Awareness

Are you currently or have you in the past used our services? Yes  No

Do you have any health or medical concerns that we should know about for your own safety or medical emergency? Yes  No

Details: \_\_\_\_\_

## Occupation / Education

Employer: \_\_\_\_\_

Previous work experience: \_\_\_\_\_

Education: Secondary YES  NO  Post-Secondary YES  NO

Degrees/Diplomas/Certificates obtained: (specify) \_\_\_\_\_

## References

We would like to contact two references one personal and one volunteer related.

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

Full Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

## Availability

I can volunteer \_\_\_\_\_ hours per day \_\_\_\_\_ days per week.

Days Available:	Monday <input type="checkbox"/>	Tuesday <input type="checkbox"/>	Wednesday <input type="checkbox"/>	Thursday <input type="checkbox"/>	Friday <input type="checkbox"/>
Time Available:					

Warehouse work on Mondays

Client services: Tuesday to Friday 8:30am-12.30pm

Drivers: produce collection/delivery, days and times vary.

Preferred Start Date: \_\_\_\_\_

## Disclaimer and Signature

*I certify that my answers are true and correct to the best of my knowledge.*

*I understand that false or misleading information may result in the termination of my volunteer status with the Friends In Need Food Bank.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_