

Volunteer Application



Contact Information

First Name*		Last Name*	
Gender:*			
Street Address			
City*		Postal Code	
Home Phone*		Cell Phone	
E-Mail Address			
Age Range			

Status*

Other, please specify:

When did you arrive in Canada?* or Since Born

Country of Origin:*

Languages

English French High German Low German

Russian Arabic Tagalog Spanish

Other, please specify:

Skills that you can use in volunteer service:

Previous Volunteer Experience

Reasons for Volunteering at South Central Immigrant Services?

Areas Interested in Volunteering?

- Child Minding Helper
- Classroom Assistant
- Conversation Circles
- Driver
- Events Helper
- Ladies Group
- Language Buddies
- Men's Group
- Translator / Interpreter

* These items are necessary for statistical compilation.

Education

- Elementary High School College / University

If you are currently a student, please indicate:

School: Grade or Level:

Availability

- Weekday mornings Weekend mornings
 Weekday afternoons Weekend afternoons
 Weekday evenings Weekend evenings

Service Centre Preferred:

- Winkler Morden Altona Carmen Morris

Other, please specify:

Emergency Contact:

Name	
Relationship	
Home Phone	
Cell Phone	

Agreement and Signature

SCIS seeks to protect participants, client, volunteers, employees and the community through appropriate screening measures. Both reference checks and Police Record Checks are required for a number of positions. I understand that I do not have to agree to these background checks, but that refusal to do so may exclude me from being considered for a volunteer placement.

If requested, are you willing to submit a Police Record Check?

If requested, are you willing to submit a Child Abuse Registry Check?

If requested, are you willing to provide 2 references (school, business or volunteer related)?

By signing your name, you agree to the following commitment:

1. I agree to adhere to SCIS's volunteer policies, rules, and regulations.
2. I agree to attend a formal Volunteer Orientation and complete required training.
3. I understand that false information on this registration form may be cause for termination of volunteer service.

Signature:		Date (yyyy-mm-dd):	
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Return to:

Elaine Hildebrand, Volunteer Program Coordinator
South Central Immigrant Services at Regional Connections

One-click online submission:

Email: elaine@regionalconnections.ca
Fax: 204-325-4158
Mail: PO Box 420, Winkler MB, R6W 4A6

In person at SCIS/Regional Connections:

- > 2-295 Perry St., Winkler
- > 34 Stephen St., Morden
- > 30 Main St., Altona

