

# VOLUNTEER APPLICATION

## FRANCISAN SISTERS BENEVOLENT SOCIETY

Business Address: 11035- 92 Street NW, Edmonton, Alberta T5H 1W5  
 Phone: (780) 422-7263 # Fax: (780) 428-1966

Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Home Telephone: \_\_\_\_\_ Cell phone: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
 Bus. Telephone: \_\_\_\_\_ May we contact you at work? Yes  No   
 E-mail address: \_\_\_\_\_  
 How do you prefer to be contacted? Home  Cell  Work  Email   
 Emergency Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

What programs are you interested in volunteering for? (Place a check beside any area of interest.)

FRANCISCAN CENTRE  FUNDRAISING  SPECIAL EVENTS   
 SAFETY/SECURITY  HOSPITALITY HOST  FOREIGN MISSION EXPERIENCE

### TIME AVAILABLE FOR VOLUNTEER WORK:

Preferred Days: \_\_\_\_\_  
 Regularly each week:  Yes  No Total Hours per Week: \_\_\_\_\_  
 Preferred Time of Shifts: \_\_\_\_\_ If 'No', then how often: \_\_\_\_\_

What interests you about volunteering with Franciscan Sisters Benevolent Society and what do you hope to gain from your volunteer experience? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Please outline any strengths, special talents, or skills you think you will bring to a volunteer position (e.g. knowledge of another language, sign language, first aid/CPR, computer experience, music, pet therapy certification, experience working with children). \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

### EDUCATION AND TRAINING

<i>Education Level:</i>	<i>Program/Major</i>	<i>Degree/Diploma/Certificate</i>	<i>Date Received</i>

Professional qualifications or licenses:

**WORK HISTORY** (begin with your most recent employment)

<i>Organization</i>	<i>Position</i>	<i>Dates</i>

**VOLUNTEER EXPERIENCE** (begin with your most recent volunteer activity)

<i>Organization</i>	<i>Volunteer Position</i>	<i>Dates</i>

**REFERENCES**

Please list the names of two to four references. If possible, please provide a combination of character, employment-related, and volunteer-related references that have known you for at least one year.

	<i>Name</i>	<i>Relationship</i>	<i>Phone</i>	<i>Length of acquaintance</i>
<i>Character</i>			Home: Work:	
<i>Character</i>			Home: Work:	
<i>Professional</i>			Home: Work:	
<i>Volunteer</i>			Home: Work:	

Any final comments or relevant information you may wish to add: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*Please read and sign the following:*

I \_\_\_\_\_ certify that all information included in this application is true and complete. I hereby grant Franciscan Sisters Benevolent Society permission to obtain information regarding my previous employment, education, and/or volunteer history and to contact those individuals listed as references. I understand that providing false information is grounds for immediate disqualification from the application process. I am aware that completing this application does not necessarily guarantee my acceptance into the Franciscan Sisters Benevolent Society Volunteer Service Programs.

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