

Covenant House Vancouver		
575 Drake Street		
Vancouver, BC V68 4K8		
Tel: 604-638-GIFT (4438)		
Fax: 604-685-5324		
www.covenanthousebc.org		

Volunteer Application Form

Date: _____

Personal Information: (Mr. Mrs. Ms. Miss. - please circle one)

First Name:	Middle Name:	Last Name:	
Street Address:		Preferred Name:	
City:		Postal Code:	
Home Phone No.	Work Phone No:	Cell No:	
()	()	()	
Email:			

Volunteer Interest

Volunteer Position: (please check area of interest)

Tutor (on call)	Shelter Assistant	Beauty Night Helper (M)
Food Services Assistant	HR Office Assistant	-Hair Dresser
Donations Sorter	Community Dinner Server	- Nail Designer
CSS Reception Volunteer	Fitness volunteer	- Makeup Designer
Clothing Room Assistant	Hair Dresser	Thank-a-thon Caller (S)
Hot Meal Server	Mail Helper (S)	Backpack Helper (S)
Recreation Assistant	Data Entry Helper	Event Helper (S)
Photo Volunteer	Wake-up Volunteer	

(M)- Monthly (S)-Seasonal (on-call) - when needed

Availability: (Please tick which days and times you would be available for a regular weekly shift)

Date/Times	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning (9-1)							
Afternoon(1-5)							
Evening (5-9)							

Location: (Please tick which location you would prefer)

Pender (326 West Pender Vancouver BC)

Drake (575 Drake street Vancouver BC)

Reasons you would like to become a volunteer at Covenant House Vancouver?

How did you find out about our volunteer program? History (Volunteer, Employment, Education, Training) Volunteer: Are you presently a volunteer? Yes □ No □ If yes, where ______ How Long? ______ **Employment:** Are you currently employed Yes 🗌 No 🗌 Full Time
Part Time
Casual Company/Organization: _____ **References:** We require two references (not relatives) that have known you for at least six months. One reference can be a written reference and attached to this application. We will contact the other reference and require their phone number, fax or email address. 1. Name :______ Relationship:______ Phone: (____) ______ □ Reference Letter Attached 2. Name : ______ Relationship: ______ Phone: (____) ______ □ Reference Letter Attached Education / Training:

School Level	Name and Location of School	Course of Study	Completed?	Certificate or Degree received
High School				
College/University			DY DN	
Post Graduate			ΟΥ ΟΝ	
Business/Trade Technical				
Other Certificates or Credentials				

Health and Safety:

Covenant House Vancouver (CHV) is committed to protecting the health and safety of all staff, volunteers, and youth. Our Management team strives to provide safe work environment that is in keeping with industry standards and all provincial regulations. This includes eliminating any potential hazards that could endanger our staff, volunteers, youth or damage personal or agency property in any way. All staff and volunteers have a responsibility to always do their best to reduce the possibility of accidents or injury in the workplace. We take the topic of Health and Safety very seriously and safety is everybody's responsibility.

Although CHV strives to protect its staff, volunteers and youth, there may be times when you can be exposed to potential health and safety hazards due to the nature of the at-risk population. People in these settings can face many hazards such as bed bugs, Infectious diseases, syringe needles, shift work, burnout, verbal threats, violence etc. It is important for you to determine which hazards affect you and what can be done to prevent illness and injuries.

Are you comfortable working in this type of setting? \Box Y \Box N

Emergency Information:

In case of emergency, contact

Name:		
Relationship		
Telephone: Home: ()	Business: ()	Cell: ()

I certify that the statements made in this volunteer application are true and correct, and have been given voluntarily. I will familiarize myself with policies and procedures as I participate at Covenant House. I also understand that this information may be disclosed to any party with legal and proper interest, and I release the agency from any liability whatsoever for supplying such information. We add the above information to our Covenant House Vancouver data base. If at any time you want to be removed from these lists, please contact us and we will gladly comply.

Covenant House Vancouver is committed to protecting the privacy of personal information entrusted to us. To read of Privacy policy, please see our website at <u>www.covenanthousebc.org</u>.

Date _____ Signature _____

Please send complete application with attention to: Tobi Newman, Covenant House Vancouver 575 Drake Street, Vancouver, BC, V6B 4K8 Fax: 604.685.5324 or by email at <u>volunteer@covenanthousebc.org</u>

Immediacy | Sanctuary | Value Communication | Structure | Choice