



Date Submitted: ____ / ____ / ____

Time: _____

Syme Woolner Neighbourhood & Family Centre Student/Volunteer Application

Name:	
Address:	
Telephone (day):	
Telephone (evening):	
Email Address:	

Please check the area of interest:

- | | |
|---|---|
| <input type="checkbox"/> Adult Drop-In | <input type="checkbox"/> Housing Connection |
| <input type="checkbox"/> Family Resource Programs | <input type="checkbox"/> Reception |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Student Placement |
| <input type="checkbox"/> Harm Reduction Program | <input type="checkbox"/> Youth Program |

1. How did you hear about Syme Woolner Neighbourhood & Family Center?

2. Why do you want to volunteer at this organization?

3. What strengths could you bring to the agency?

4. Do you have any volunteer experience?

5. Do you have any training, education or experience that may be useful while volunteering with SWNFC?



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6. Do you speak a second language?

7. I am available to volunteer: (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Monday a.m. | <input type="checkbox"/> Monday p.m. |
| <input type="checkbox"/> Tuesday a.m. | <input type="checkbox"/> Tuesday p.m. |
| <input type="checkbox"/> Wednesday a.m. | <input type="checkbox"/> Wednesday p.m. |
| <input type="checkbox"/> Thursday a.m. | <input type="checkbox"/> Thursday p.m. |
| <input type="checkbox"/> Friday a.m. | <input type="checkbox"/> Friday p.m. |
| <input type="checkbox"/> Saturday a.m. | <input type="checkbox"/> Saturday p.m. |
| <input type="checkbox"/> Sunday a.m. | <input type="checkbox"/> Sunday p.m. |

8. How many hours a week are you available to volunteer? _____

9. What is the best time to contact you for an interview? _____

10. Special skills and experience that you have and we should know about:

- | | | |
|--|--|----------------------------------|
| <input type="checkbox"/> Customer skills | <input type="checkbox"/> Accounting | <input type="checkbox"/> Driving |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Office administration | <input type="checkbox"/> Handy |
| <input type="checkbox"/> Web design | <input type="checkbox"/> Web-site administration | |
| <input type="checkbox"/> Is creative | <input type="checkbox"/> Event Planning | |
| <input type="checkbox"/> Cooking skills | <input type="checkbox"/> Computer Programming | |

Previously worked as _____

Knowledge of _____

FOR STUDENTS ONLY: Please indicate the name of the school you presently attend, the days for placement and the course you're studying:

Thank you for your interest in our agency.