



Volunteer Application Form

Victim Services of Simcoe County believes that everyone is entitled to human rights and justice regardless of individual differences. The agency strives to safeguard these rights to preserve human dignity and achieve equity.

Identification

Full name: _____

Preferred Gender Pronouns: _____

Address (including postal code): _____

Telephone #: (____) _____ - _____ Cell #: (____) _____ - _____

Email Address: _____

Employment and Education

Please indicate your current status:

Employed Retired Student Other: _____

Education: If attending school, in which academic program are you enrolled?

Transportation

Do you have a reliable car to travel within and outside the agency's area? Yes No

Attach a copy of your driver's licence and liability insurance on the vehicle you will be using while travelling for agency business.

Driver's Licence #:

Name of Insurance Provider: _____

General Information

1. Are you currently volunteering for another organization? Yes No
If yes, name the organization and your role: _____
2. Do you give Victim Services of Simcoe County permission to use written comments and/or your personal photos for the purpose of distributing newsletters and promoting the program?
..... Yes No
3. Do you speak another language? Yes No
If yes, what other language(s) do you speak? _____
4. Tell us what you can bring to our team.

5. How did you find out about volunteer opportunities with Victim Services of Simcoe County?
 Newspaper Word of mouth School (Name: _____)
 Brochure Social media Volunteer fair Community bulletin board

Volunteer Expectations

Volunteers are expected to complete the online and in-class volunteer training program, sign up for a minimum of four 12-hour on-call shifts or eight 6-hour shifts per month, have access to a well-maintained vehicle while on duty, have a cell phone and be able to pay their own cellular costs, complete two professional development sessions per year, and attend one evening volunteer meeting per month.

Are you able to meet these expectations for a minimum of one year? Yes No

Are you currently 19 years or older? Yes No

Are you able to commit to a minimum of four 12-hour shifts or eight 6-hour shifts a month?
..... Yes No

Are you able to commit to in-class training sessions and online training? Yes No

Are you able to commit to one evening volunteer meeting a month? Yes No

Do you have a cell phone and Internet access? Yes No

Note: Due to the sensitive nature of our work and client information, all volunteers undergo background screening and an interview. References are thoroughly researched. A police record check and a vulnerable sector screening is required.

References

Employment Reference:

Name of Employer: _____

Name of Supervisor: _____

Phone Number: _____

Volunteer Reference:

Name of Organization: _____

Name of Volunteer Supervisor: _____

Phone Number: _____

Personal Reference:

Name: _____

Relationship to Volunteer: _____

Phone Number: _____

Declaration

I declare the above information to be true and complete. I understand that in the event of my acceptance as a volunteer with Victim Services of Simcoe County, I shall be subject to dismissal at any time if any information I have given in this application is false or misleading.

I authorize Victim Services of Simcoe County to contact the persons I have named as references to research my qualifications for this position. I hereby give my consent for any person, educational institution or company I have listed as a reference on my application, to disclose in good faith any information they may have about my qualifications and fitness for this volunteer position. I will hold Victim Services of Simcoe County harmless for the exchange of information obtained relevant to the recruitment process to become a volunteer.

I understand that nothing in this volunteer application or the offer of an interview guarantees my acceptance into the volunteer program.

Applicant's Signature

Date

Thank you for your interest in volunteering with Victim Services of Simcoe County.