

Date of interview: _____

OTTAWA BROCKVILLE

VOLUNTEER APPLICATION FORM

PLEASE PRINT CLEARLY

Thank you for offering to volunteer your time and skills at The Royal. In order to facilitate the most appropriate volunteer placement for you, the following information would be helpful. Please ensure that all the questions are completed as fully as possible.

Name & Pronouns: _____ Date of birth: _____

Address: _____ Apartment #: _____

City: _____ Prov.: _____ Postal code: _____

Home phone: _____ Business phone: _____ Email: _____

Cell phone: _____ Languages spoken: English French Other: _____

Emergency contact name: _____

Relationship: _____ Phone: _____

I AM CURRENTLY

- Employed Full-time Part-time A student at _____ in grade/year _____
 Seeking employment A homemaker On disability Retired
 Other (please specify) _____

Health issues we should be aware of: _____

Previous volunteer experience: _____

I PREFER TO VOLUNTEER IN:

Shops

- Coffee
- Clothing
- Hair salon

Administrative

- Clerical or office
- Data entry
- Financial
- Committees
- V.A. Board of Directors
- Special events
- Coordination

Interactive

- Program assistant
- Sports & fitness
- Friendly visiting
- Leisure activities
- Arts (eg. crafts, music)
- Adult literacy or math
- Computer Training

Other

- Research
- Leadership or training
- AA or NA speaker
- Surveying
- Client/family advisory councils
- Client/family resource hub

Relevant skills (eg. sales, teaching, computers)

Relevant hobbies (eg. fitness, gardening)

I PREFER TO WORK

- With adults
- With seniors
- Alone

I WILL COMMIT TO

- 8 months
- 1 year
- Possibly more

I am available (*check all that apply*): Weekdays

Evenings Weekends

I would like to give _____ hours per week on a

Regular basis Irregular basis

Briefly describe your current situation (studying, working full-time, part-time, on disability, etc.)

Tell us about your past volunteer-related experience.

The Royal is committed to equity, diversity and inclusion. How do you feel you can contribute to that commitment while volunteering with us?

Why would you like to Volunteer at The Royal and what, if any, previous experience/contact have you had with us in the past?

PLEDGE OF CONFIDENTIALITY:

I understand and agree that in the performance of my duties as a volunteer at The Royal, I must hold patient information, as well as information perceived as protected or confidential regarding the ROHCG, its staff or agents, in strict confidence, revealing information only to those authorized to receive it. I also understand, as per The Royal's policy, that I am required to refer all media requests, regardless of the nature or format of the request, to the Royal's communications department. Further, I understand and agree that any violation of The Royal's policies may result in disciplinary action, including suspension from duties or immediate dismissal.

Signature

Date

Personal information contained in this form is collected under The Royal's Policies and Procedures. Police Records Checks for Service with Vulnerable Sector is required and will be used to determine eligibility for volunteer services with The Royal. Questions about this policy should be directed to **Director of Volunteer Services**, 1145 Carling Avenue, Ottawa, Ontario, K1Z 7K4, Telephone 613.722.6521, ext. 6004.