



Volunteer Registration and Application Form

Your Information

First Name: _____ Last Name: _____

Mailing Address: _____

City: _____ Province: _____ Postal Code: _____

Home Phone: _____ Work: _____ Cell: _____

Email Address: _____ I prefer to be contacted by: ___ Phone ___ Email

Do you have any allergies we should be aware of? _____

Emergency Contact

Name: _____ Relationship: _____

Home Phone: _____ Work: _____ Cell: _____

More About You

Which of these answers best describes you? _____ Student _____ Working _____ Retired _____ Other

Age Group: ___ 18 to 29 years ___ 30 to 45 years ___ 46 to 60 years ___ 61 to 75 years ___ 76 + years

Education: ___ High School ___ Post-Secondary ___ Professional Training/Trade _____ Specify

Special Interests, Skills or Hobbies: Specify _____

Volunteer Experience

Please indicate the month and year that you started at The Gathering Place.

Month _____ Year _____ In which program areas do you volunteer? _____

If you have volunteered with other organizations, please provide detail below.

Organization	Start Date	End Date	Reason for Leaving

Your Availability

At present, programs and services are offered at the Gathering Place during daytime hours Monday to Friday. With the re-construction of our facility and our expansion of programs, additional opportunities and time slots will become available for volunteering. Please indicate your availability below.

How frequently would you like to volunteer? Daily _____ Once a week _____ Twice a Week _____
 Other _____ Please explain: _____

Please indicate the hours that you are available below.

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Evening					

If The Gathering Place were to be opened at other times, would you be available? Saturday _____ Sunday _____

Are there times throughout the year that you are not available (vacation, etc)? Please indicate: _____

References

Name	Organization	Phone Numbers	Email for References

I certify that the information contained in this application is correct to the best of my knowledge and consent to persons given as references responding to verbal and/or written requests for information.

Signature: _____

Date: _____

Certificate of Conduct and Vulnerable Sector Check

Please note a Certificate of Conduct and Vulnerable Sector Check is required to volunteer in any capacity with The Gathering Place. Please find enclosed your request form for your Certificate of Conduct and Vulnerable Sector Check and a letter verifying that you volunteer at The Gathering Place. This letter ensures that there will be no charge to you.

Please return to info@gatheringstjohns.ca or to The Gathering Place, P.O. Box 1761, St. John's, NL A1C 5P5

For office use only:		Date Received:	
Interview Date:		COC/VSC:	Yes No
References Checked	Yes No	1st Training Date:	
Accepted	Yes No	2nd Training Date:	
Orientation Letter/Package		Mailing List:	
Orientation Date:		Processed by:	

Certificate of Conduct and Vulnerable Sector Check

Please note a Certificate of Conduct and Vulnerable Sector Check is required to volunteer in any capacity, with The Gathering Place.

- Certificate of Conduct and Vulnerable Sector Check applications may be found at www.rnc.gov.nl.ca or by calling 729-8290.
- The letter below should accompany your application to the Royal Newfoundland Constabulary or your local Royal Canadian Mounted Police.

Re: Certificate of Conduct and Vulnerable Sector Check

The Gathering Place has received an application from the bearer of this application to volunteer with our organization.

Due to the nature of the volunteer work he/she is applying for, we will require a Certificate of Conduct and a Vulnerable Sector Check in order to approve his/her volunteer application.

This correspondence will verify that the bearer of this letter has applied to serve or continue to serve as a volunteer with The Gathering Place.

If you require any further information, please do not hesitate to contact The Gathering Place at 709-753-2351.

Thanking you in advance.

Sincerely,

Nancy Elkins
Volunteer Coordinator
nancyelkins@gatheringstjohns.ca