



BROCK ELEMENTARY SCHOOL

Volunteer Application

I am seeking Volunteer Work.

PERSONAL INFORMATION

DATE:

LAST NAME	FIRST NAME		
PRESENT ADDRESS	CITY	PROVINCE	POSTAL CODE
PHONE NUMBER	E-Mail Address		REFERRED BY:

DESIRED TYPE OF WORK:

POSITION	DATE AVAILABLE
ARE YOU CURRENTLY EMPLOYED?	MAY WE CONTACT YOUR PRESENT EMPLOYER?

HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR OR FELONY? IF YES, PLEASE EXPLAIN:
 ANSWERING YES DOES NOT EXCLUDE YOU FROM EMPLOYMENT

EDUCATION HISTORY

NAME	YRS ATTENDED	DEGREE	MAJOR
HIGH SCHOOL			
COLLEGE/UNIVERSITY			
RELIGIOUS INSTITUTION			

GENERAL INFORMATION

SPECIAL TRAINING OR SKILLS:

REFERENCES- Please list two people not related to you, whom you have known at least 2 years.

NAME	TELEPHONE #	BUSINESS	YRS. KNOWN

FORMER ORGANIZATIONS YOU VOLUNTEERED (List below the last two)

DATES	COMPANY/INSTITUTION	ADDRESS	PHONE #
POSITION	SUPERVISOR	REASON FOR LEAVING	
JOB DESCRIPTION			

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AUTHORIZATION:

“I certify that the facts contained in this application are true and complete to the best of my knowledge.

Date:	Signature:
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For office use: