

How to Become a Volunteer

1. Complete a volunteer application form
2. Attend a personal interview with the coordinator of volunteers
3. Complete a successful criminal record check

VOLUNTEER APPLICATION FORM

Name (please print): _____

Address: _____ Postal Code: _____

Phone: _____ Alternate Phone: _____

Email: _____

Age (if under 16): _____ Date of Birth: _____

Parents Signature (if under 16): _____

Emergency Contact (name/phone): _____

As part of our risk management, ALL volunteers will be required to complete an RCMP criminal record check at no cost. The form will be provided to you during your interview.

I want to volunteer with the City of Penticton because:

Describe your hobbies, skills, education (i.e. art, language, first aid, class 4, etc.):

Preferred area of interest and type of volunteer work: (may choose more than one)

Community Centre

- Customer Service (fitness room control)
- Skate shop (McLaren arena)
- REACT – Aquatic Rehab
- Program Assistant
- Childminding

Special Events

- Planning and coordination
- Set up and take down
- Special projects
- Event Assistant
- Theatre Usher

Availability:

Monday	<input type="checkbox"/>	Mornings	<input type="checkbox"/>	Afternoons	<input type="checkbox"/>	Evenings
Tuesday	<input type="checkbox"/>	Mornings	<input type="checkbox"/>	Afternoons	<input type="checkbox"/>	Evenings
Wednesday	<input type="checkbox"/>	Mornings	<input type="checkbox"/>	Afternoons	<input type="checkbox"/>	Evenings
Thursday	<input type="checkbox"/>	Mornings	<input type="checkbox"/>	Afternoons	<input type="checkbox"/>	Evenings
Friday	<input type="checkbox"/>	Mornings	<input type="checkbox"/>	Afternoons	<input type="checkbox"/>	Evenings
Saturday	<input type="checkbox"/>	Mornings	<input type="checkbox"/>	Afternoons	<input type="checkbox"/>	Evenings
Sunday	<input type="checkbox"/>	Mornings	<input type="checkbox"/>	Afternoons	<input type="checkbox"/>	Evenings

Personal Reference: _____ Phone: _____

Business Reference: _____ Phone: _____

Signature: _____ Date: _____

Personal information on this form is collected under the authority of the Freedom of Information & Protection of Privacy Act (the Act) for administrative purposes of the City of Penticton. Personal information is protected from unauthorized use and disclosure in accordance with the Act and may only be used and disclosed as provided by the Act. If you have any questions regarding the collection, use and disclosure of this information, please contact the Head, Freedom of Information and Protection of Privacy at corporadmin@penticton.ca or call 250-490-2410.

<u>FOR OFFICE USE ONLY</u>		
Interview Date: _____		Orientation Date: _____
Coordinators Signature: _____		Date Processed: _____
Database <input type="checkbox"/>	Name Tag <input type="checkbox"/>	Filed <input type="checkbox"/>