

VOLUNTEER APPLICATION

Instructions:

Please complete all sections as thoroughly as possible, even if you are attaching a resume. It is necessary to provide complete information as this will be used to determine eligibility and qualifications for a position.

An electronic version of this form is available at www.notredamedelorette.info

The personal information requested on this form is collected and managed as per applicable Privacy Legislation.

All information to us will be considered as supplied in confidence.

OFFICE USE ONLY

DATE RECEIVED

POSITION INFORMATION: Preferred Volunteer Ministry Position or Positions Applying for

Time	Full Time	Part	TYPE(S) OF POSITION – please describe
PERMANENT			
TEMPORARY			
PERMANENT			
TEMPORARY			
PERMANENT			
TEMPORARY			

PERSONAL INFORMATION

LAST NAME	FIRST NAME	INITIALS	RESIDENCE TELEPHONE NO.
			MOBILE TELEPHONE NO. – or message
MAILING ADDRESS		CITY	PROVINCE POSTAL CODE
		Email Address	

VOLUNTEER EXPERIENCE

NAME OF INSTITUTION OR ORGANIZATION	LOCATION	DATES	MINISTRY	REFERENCE	CONTACT INFO

ASSOCIATION / PROFESSIONAL AFFILIATIONS

List any active memberships or registrations in a professional or career related organization or society.

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SKILLS / EXPERIENCE

Check (✓) areas of skills/experience that you have which relate to the advertised position or, if this is a general application, to the position(s) that interests you, and attach any appropriate documentation.

	NET SPEED	NO. OF YEARS/ MONTHS EXPERIENCE/ TRAINING	LIST RELATED SKILLS THAT APPLY
KEYBOARDING			
DATA ENTRY			
(LIST REQUIRED SKILL)			
(LIST REQUIRED SKILL)			
OTHER			

DRIVER'S LICENSE INFORMATION

Provide the following information if applying for a position where driving is a requirement.

List class(es) of valid driver's license.	List any restrictions on license.	If required, do you have access to a vehicle?	
		YES	NO

PROBATIONARY PERIOD

All new volunteers of *Notre-Dame-de-Lorette* shall be subject to a probationary period of a minimum of six (6) months. Please be advised that a component of the probationary review will include consultation with those who have been under your care, charge or guidance.

CRIMINAL RECORD CHECK

All Prospective Volunteers who will work with children/youth and/or vulnerable adults or in a high risk ministry position are required to produce physical evidence of a clean Criminal Record check every 5 years. Please be advised that your Criminal Record check must also include the Vulnerable Sector check which is typically researched at the same time and on the same application.

CHILD & ADULT ABUSE REGISTRY CHECKS

It shall be a condition of volunteerism that all Prospective Volunteers who will work with children/youth and/or vulnerable adults or in a high risk ministry position sign a consent form permitting *Notre-Dame-de-Lorette* to conduct a search of the Manitoba Child Abuse Registry and the Manitoba Adult Abuse Registry in order to obtain physical evidence of clean registry checks. These Abuse Registry checks may be conducted annually thereafter at the sole discretion of *Notre-Dame-de-Lorette* and with the consent of the Volunteer. A Volunteer in these ministry positions who refuses to provide consent may have their volunteer status revoked.

APPLICANT SIGNATURE

Please read carefully before authorizing. This application is not valid unless your name, as authorization, is signed or written in the "Signature" space provided below. (Note: If this application is submitted electronically, it is not valid unless your name is keyed in the "Signature" space provided below).

Your authorization on this application form is your consent that as a condition of being considered for volunteerism at *Notre-Dame-de-Lorette*, references checks regarding past volunteerism may be conducted.

I certify that the information provided in this application true and complete. I understand that if any information in this application is found to be untrue or incomplete, my application may be rejected or my services may be suspended or revoked.

X	DATE SIGNED YYYY / MM / DD
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SIGNATURE (If applying electronically please type your name as authorization)

FOR OFFICE USE ONLY

HIRING NOTES
