

# VOLUNTEER APPLICATION FORM

THUNDER BAY 55 PLUS CENTRE  
700 River St.  
Thunder Bay, ON P7A 3S6  
PH: 684-3277 FAX: 345-1612  
Email: tessa.hettrick@thunderbay.ca



Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
Address: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_

1. Please indicate any previous employment or training that you feel may be beneficial to your volunteer placement.

\_\_\_\_\_  
\_\_\_\_\_

2. What previous volunteer experience do you have and where?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Please list your hobbies and interests (i.e. Crafts, Typing, Gardening, Travel)

\_\_\_\_\_  
\_\_\_\_\_

4. Are you comfortable handling cash and/or using a cash register?    **YES**                      **NO**

5. Do you write/speak any other language?                      **YES**                      **NO**

If yes, please specify: \_\_\_\_\_

6. Reasons for Volunteering

- |   |  |
|---|--|
| <input type="checkbox"/> Gain experience working with people  | <input type="checkbox"/> Help others     |
| <input type="checkbox"/> Give something back to the community | <input type="checkbox"/> Personal growth |
| <input type="checkbox"/> Have spare time                      | <input type="checkbox"/> Meet new people |
| <input type="checkbox"/> Other _____                          |  |

7. How did you find out and volunteering with the Thunder Bay 55 Plus Centre?

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> At the Centre | <input type="checkbox"/> Friend/Family | <input type="checkbox"/> City Website          |
| <input type="checkbox"/> The Key       | <input type="checkbox"/> Newsletter    | <input type="checkbox"/> Volunteer Thunder Bay |
| <input type="checkbox"/> Other: _____  |  |  |

**PLEASE CHECK OFF AREAS OF INTEREST FROM THE LIST BELOW**

**General Opportunities**

- |   |  |
|---|--|
| <input type="checkbox"/> Library                              | <input type="checkbox"/> Gift Shop         |
| <input type="checkbox"/> Information Desk                     | <input type="checkbox"/> Office Assistant  |
| <input type="checkbox"/> Set-up Crew                          | <input type="checkbox"/> Activity Convenor |
| <input type="checkbox"/> Volunteer Program Database Assistant |  |

**River Street Café**

- |   |                                       |
|---|---------------------------------------|
| <input type="checkbox"/> Kitchen – food preparation | <input type="checkbox"/> Café Cashier |
| <input type="checkbox"/> Dishwasher                 |                                       |

**Board and Committee Work**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Centre Board of Directors | <input type="checkbox"/> River Street Café Food Board |  |
| <input type="checkbox"/> Computer Management Team  | <input type="checkbox"/> Money Counters               |  |
| <input type="checkbox"/> Centre Committees         |   |  |
| <input type="checkbox"/> Activity Committee        | <input type="checkbox"/> Events Committee             | <input type="checkbox"/> Marketing Committee |
| <input type="checkbox"/> House and Grounds         | <input type="checkbox"/> Volunteer Advisory           | <input type="checkbox"/> Art Committee       |

**Seasonal**

- |  |   |
|--|---|
| <input type="checkbox"/> Weekly Dances – kitchen, door         | <input type="checkbox"/> Income Tax Volunteer |
| <input type="checkbox"/> Yard Maintenance – Grass cutting etc. | <input type="checkbox"/> Bingo Caller         |

**YES! I am interested in more information about volunteering with Support Services**

This is community based and includes programs such as Friendly Visiting Program, Telephone Assurance Program, and Walk-A-Bit Program.

**YES! I am interested in more information about volunteering with the Community Programs**

There programs include Walking Programs, Wit Knits, Retirement Explorers, Bocce, Softball, FABs as well as other programming.

**YES! I would like to be added to the Special Events Contact List**

This list is used to call volunteers when planning for Fundraising and Special Events

**AVAILABILITY**

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
<b>Morning</b>							
<b>Afternoon</b>							
<b>Evening</b>							

My time is flexible

I am only available when indicated

Additional Notes (ie: prefers summers off, winters away etc.)

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**CONSENT AND AUTHORIZATION FOR REFERENCE CHECK:**

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I authorize The Corporation of the City of Thunder Bay, Volunteer Program, Thunder Bay 55 Plus Centre, to contact the persons or organizations listed below for the purpose of obtaining reference information.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PROFESSIONAL REFERENCES – employers or coworkers, volunteer supervisors or peers**

1. Reference Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

2. Reference Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

In case of an emergency, the person below may be contacted

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Relationship to you: \_\_\_\_\_ Other number \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

\_\_\_\_\_

Personal information on this form is collected under the authority of the Municipal Act and will be used to determine eligibility for volunteer positions and to maintain a record of volunteer information. Questions about this collection of personal information can be directed to the Community Services Department, Recreation Division, Older Adult Unit, c/o 700 River Street, Thunder Bay, Ontario, P7A 3S6 at **684-3163**.

**OFFICE USE ONLY**

Interviewer: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Volunteer Checklist in file Y N Date started:** \_\_\_\_\_