



1669 Eglinton Ave. W
Toronto, Ontario
M6E 2H4

t: 416.925.4386
f: 416.925.9112

www.johnhowardtor.on.ca

Yes ____ No ____

If volunteering, how many days/hours do you feel you can reasonably volunteer per week? ____

If on student placement please specify the following: Start Date ____ End Date ____ Days of week ____ Total Hours required ____

Languages spoken: ____ English ____ French ____ Other (Please specify) ____

Please attach your resume and cover letter to this application.

Please provide us with three references. Please note reference should not be family members.

1. Name: _____
Address: _____
Telephone & Email: _____

2. Name: _____
Address: _____
Telephone & Email: _____

3. Name: _____
Address: _____
Telephone & Email: _____

Making this application, I hereby give the John Howard Society of Toronto authority to contact the person's names in references and to make enquiries with the Police and other criminal justice official as necessary to ascertain my suitability as a volunteer.

Signed: _____ Date: _____

Witness: _____ Date: _____

Please mail or fax your application to:
The John Howard Society of Toronto
Attention: Marika McKoy-Smith
1669 Eglinton Ave. West
Toronto, On M6E 2H4
FAX: 416.925.9112

For more information please contact:
mmckoy-smith@johnhowardtor.on.ca

Due to the high volume of applications we are unable to respond to each applicant in a timely fashion although every effort will be made.

Thank you for submitting an application to the John Howard Society of Toronto.