

VOLUNTEER APPLICATION FORM

Contact Information		
Last Name	First Name	Telephone
Street Address		Email Address

Please complete the following questions:

Why are you interested in volunteering for the John Howard Society of York Region?

Have you had any previous volunteer or student placement experience?

How would your values fit with those of the John Howard Society? Please visit: www.johnhoward.on.ca/yorkregion

Do you have a criminal record for which you have not received a record suspension? If yes, please describe:

Please list the days and times you are available to volunteer:

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Reference #1		
First Name	Last Name	Telephone
Organization	Position	Email Address

Reference #2		
First Name	Last Name	Telephone
Organization	Position	Email Address

Please note: in order to be considered for volunteer placement, a recent Local Police Record Check is required

Please submit completed *application form* and *resume* to John Howard Society of York Region via:

Email: admin@johnhoward.yorkregion.on.ca

Fax: 905-895-0861

Through the completion of this application, I confirm that the information provided is accurate and, further, that I give authority to the John Howard Society of York Region to contact the persons named as references in order to ascertain my suitability as a volunteer with the agency.

Applicant Signature: _____ Date: _____