



Agapè Centre Volunteer Application

40 Fifth Street West

Cornwall, ON K6J 2T4

Phone: (613) 938-9297 Ext 21 Fax: (613) 933-4971

Website: www.agapecentre.ca

Thank you for your interest in volunteering with the Agapè Center. Volunteers play a vital role in the delivery of services to the community. All volunteer applications are reviewed with consideration of current volunteer opportunities. Applications are kept on file for three months. All individuals who are qualified and meet requirements established for a position will be contacted for an interview.

Name: _____ Mr. Mrs. Miss. Ms.

Mailing Address: _____

City: _____ Postal Code: _____

Telephone: (Home): _____ (Cell): _____ (Business): _____

E-Mail: _____ Birth-date: _____

Month Day Year

Emergency contact?

Name: _____ Relationship: _____ Phone: _____

WORK EXPERIENCE

Please list your employment experience, starting with the most recent:

Employer: _____ Date of Employment: _____

Position and job duties: _____

Employer: _____ Date of Employment: _____

State position and job duties: _____

EDUCATIONAL BACKGROUND

List any relevant Post-secondary Education, Certifications, Courses or Workshop that you have attended.

PREVIOUS VOLUNTEER EXPERIENCE (Use separate sheet if necessary)

Organization: _____ Date of Commitment: _____

Assignment/Duties: _____

INTEREST/HOBBIES/ACTIVITIES/SKILLS

REFERENCES

Name: _____ Name: _____

Relationship: _____ Relationship: _____

Phone: _____ Phone: _____

I give my permission to contact the above individuals, any previous employer, and supervisors of my volunteer commitments.

GENERAL INFORMATION

What type of volunteer work are you interested in?

Soup Kitchen Reception Food Bank Clothing Store Sorting Centre

Fundraising Event Organizing Administration Other: _____

What are your availabilities for a Volunteer commitment? (i.e. hrs/week): _____

Why do you want to volunteer at The Agapè Center?

How did you hear about the volunteer opportunities that are available at The Agapè Centre? _____

Is there any additional information you would like to bring to our attention?: _____

Signature: _____ Date: _____

For office use:

Interview Date: _____ Start date: _____

Notes: _____
