|  |  |
| --- | --- |
| **Parish Name:** |  |



# Form 1: Volunteer Application

|  |  |
| --- | --- |
| Contact Information | |
|  | |
| Name |  |
| Street Address |  |
| City, Postal Code |  |
| Telephone | Home: Other: |
| E-Mail Address |  |

|  |  |  |
| --- | --- | --- |
| Availability | | |
| During which hours are you available for volunteer assignments? | | |
| * Weekday: | mornings afternoons evenings | |
| * Weekend: | mornings afternoons evenings | |
|  |  | |
| Interests | |
| Tell us in which areas you are interested in volunteering | |
|  | |
|  | |

|  |
| --- |
| Special Skills or Qualifications |
| Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports. |
|  |
|  |

|  |  |
| --- | --- |
| Person to Notify in Case of Emergency | |
|  | |
| Name |  |
| Street Address |  |
| City, Postal Code |  |
| Telephone | Home: Other: |
| E-Mail Address |  |

# Form 1: Volunteer Application

|  |  |
| --- | --- |
| Two Parish Member References | |
|  | |
| Name |  |
| Street Address |  |
| City, Postal Code |  |
| Telephone | Home: Other: |
| E-Mail Address |  |

|  |  |
| --- | --- |
| Name |  |
| Street Address |  |
| City, Postal Code |  |
| Telephone | Home: Other: |
| E-Mail Address |  |

|  |  |
| --- | --- |
| Agreement and Signature | |
| By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, there are requirements that I must meet for the diocesan policy for “Developing a Safe Parish Community” before I will be able to volunteer. If required, I will complete a Criminal Record Check form provided by the parish and I will take it to the local RCMP detachment for completion. I understand that any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. | |
|  | |
| Name (printed) |  |
| Signature |  |
| Date |  |

Parish Office Use

**Parish Ministry – Approval Requirements**

**(choose General or Higher Risk)**

**Date Completed**

**General Risk Higher Risk**

1. Safe Parish Community Pledge – read and signed \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

2. Reference letters – received

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_

3. Criminal Record Check –

- given to volunteer N/A \_\_\_\_\_\_\_\_\_\_\_

- returned by government agency

4. Developing a Safe Parish Community orientation session – attended N/A \_\_\_\_\_\_\_\_\_\_\_

5. Approved by Pastor \_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_