



Volunteer/ Fee for Service Application

NAME _____
 ADDRESS _____
 PHONE _____ CELL _____
 EMAIL _____

Volunteer Positions	✓
Friendly Visitor	
Telephone Friend	
Check In Calls	

Availability	<i>(please check all times available)</i>		
Day	Time of Day		
	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Friday			
Thursday			
Saturday			

Fee for Service Positions	✓
Housekeeping	
Grass cutting	
Snow Removal	
Yard maintenance	
Transportation	
General handi-man <i>(Clearing gutters, small home repair jobs, other misc. jobs)</i>	

Specify other _____

Fee for Service Referrals	✓
Footcare – Referral	
Massage – Referral	
Other Referral services	

Specify other _____

Please give a brief description of why you are suitable for the requested position(s) including work experience, credentials, personality and/ or reasons for applying at the Services for Seniors Department of the Winkler Senior Centre.

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Please list any concerns that would limit your ability to volunteer:

Please provide 3 references (No more than 1 may be family)

1.

Name			
Phone		Cell Phone	
Email			
Relationship			

2.

Name			
Phone		Cell Phone	
Email			
Relationship			

3.

Name			
Phone		Cell Phone	
Email			
Relationship			

I, _____ (please print name), authorize Services to Seniors – Winkler Senior Centre to contact my references. I understand that any volunteer or fee or service placement or referral is conditional upon the Services for Seniors department being completely satisfied with the information provided as a result of this reference check.

Signature / Date

**All information in this form will be kept strictly confidential. All volunteers are required by the Regional Health Authority to provide a current (2 months) Criminal Record Check with vulnerable sector check and an Adult Abuse Registry Check before assignment to a volunteer or fee-for-service position.*