

Volunteer Application

Ms. / Mrs. / Mr.

name

address

city / province / postal code

email

home phone

work phone

Do you have voicemail or answering machine? Y or N

Are you required to volunteer through Ontario Works Program? Y or N

* Please note we do not accept applicants fulfilling Community Service hour requirements.

How did you hear about Mid-Toronto Community Services' Volunteer Program?

**Two references are needed to process your application*

Reference #1 (Professional/Character - please no family members)

name

phone number

relationship

Reference #2

name

phone number

relationship

Position Applied For:

Adult Day Program

Telephone Reassurance

Other (please indicate)

Meals on Wheels Driver

Meals on Wheels Runner

Do you have a car? Y or N

Days/times available:

Mid-Toronto Community Services

mail: 192 Carlton Street, second floor, Toronto, Ontario M5A 2K8 fax: 416.962.5541

email: volunteer@midtoronto.com tel: 416.962.9449

Background Information

employment experience

volunteer experience

language(s) spoken

hobbies

Do you have any special needs?

Emergency Contact Person

name

phone number

relationship

In making this application I hereby give permission to Mid-Toronto Community Services Volunteer Department to contact the persons named as references and also to make inquiries to ascertain my suitability as a volunteer.

I understand that in the course of carrying out my duties I will be dealing with information that is confidential. This includes information about Mid-Toronto Community Services, as well as clients and/or staff.

I hereby agree to hold such information confidential and, except when legally required, I will not disclose or release the information to any person at any time.

I agree to inform Mid-Toronto Community Services of any criminal infractions, which compromise my suitability to perform my volunteer duties.

signature

For Drivers Only

I agree to inform Mid-Toronto Community Services of any changes to my automobile insurance and licensing, which compromise my suitability to perform my volunteer duties. I am aware that Mid-Toronto Community Services' vehicle insurance does not replace my own vehicle insurance while I am performing my own duties using my own vehicle.

drivers license number and expiry date

insurance (company/policy)

signature