

Volunteer Application Form

Thank you for your interest in volunteering with *People of Purpose, Community Development Corporation (POP CDC)*.

Volunteers play a vital role in the communities of our organizations across the network of POP CDC. All volunteer applications are reviewed with consideration of current volunteer opportunities. The information you provide will be stored in confidence under the provisions of the Data Protection Act. Your completed form will be held securely and confidentially. Only authorized staff will have access to your information.

Personal Details

Name: _____ Mr. ☐ Mrs. ☐ Miss. ☐ Ms. ☐

Postal Address: _____

County: _____

Telephone: (Home) _____ (Mobile) _____

E-Mail: _____

Birth-date: _____
Day / Month / Year

If you are involved with us as a volunteer and an emergency arises, whom should we contact?

Name: _____ Relationship: _____

Telephone: (Home) _____ (Mobile) _____

Equal Opportunities

People of Purpose CDC is committed to equal opportunities and all volunteer recruitment decisions will be based on merit, suitability for the role and experience. All volunteer recruitment decisions will not be influenced by race, color, nationality, religion, sex, marital status, family status, sexual orientation, disability, age or membership. POP CDC fully endorses a working environment free from discrimination and harassment.

People of Purpose CDC are committed to standards of excellence in Youth and Family Service practices. Where your volunteer role may have direct contact with children, you may be required to complete a background check, which will be processed by the national office of POP CDC. In the mean time, please complete the question below.

Have you ever been convicted of an offense? *(this will not be used to approve or deny your application)*
Yes ☐ No ☐

If you ticked yes, please provide details below

Your Skills and Interests

1. Have you ever done any voluntary work before? Yes ☐ No ☐

If you answered yes, please tell us a little about the experience.

2. Why do you want to volunteer now? What has motivated you to get in touch with us?

3. Do you have any particular skills or qualities that you could use in your voluntary work?

4. Are you applying for a specifically advertised position on Volunteer Match? Yes ☐ No ☐

If yes, please write the following: Role name _____
Volunteer Opportunity _____

5. What kind of voluntary work interests you?

(See 'Categories of Volunteering in POP for more information)

- ☐ Board Member/Working Committees
- ☐ Summer Camp Instructors/Youth Camp Counselor/Motivational Speakers
- ☐ After-School Program and Activities
- ☐ Project Based Volunteering
- ☐ Internship
- ☐ Other

6. When are you available for voluntary work? ☐ Totally Flexible

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

7. How long do you intend to volunteer for? _____
(note that some opportunities demand a minimum time commitment, i.e. Board level roles)

8. Where do you wish to volunteer? _____
(County / City Area or National Office / Local School)

9. How did you find out about volunteering with POP CDC?

- | | |
|---|---|
| <input type="checkbox"/> Information / Outreach meeting | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> POP CDC Website | <input type="checkbox"/> A Volunteer Center |
| <input type="checkbox"/> Leaflet / Poster | <input type="checkbox"/> Community Partner |
| <input type="checkbox"/> Word of Mouth | <input type="checkbox"/> Media Radio / Television / Newspaper |
| <input type="checkbox"/> Internet www. _____ | |

References

1.

Name: _____ Relationship: _____

Place of Work: _____ Position: _____
(If applicable)

Telephone: (Home) _____ (Mobile) _____

E-Mail: _____

2.

Name: _____ Relationship: _____

Place of Work: _____ Position: _____
(If applicable)

Telephone: (Home) _____ (Mobile) _____

E-Mail: _____

If you have any queries when completing this application form, please phone *People of Purpose Community Development Corporation at 877-742-7487* or e-mail info@peopleofpurpose.info. If you would like to find out more about *POP CDC*, log onto our website www.peopleofpurpose.info.

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

I declare that the information I have provided is true. All my actions as a volunteer will reflect the ethics of POP CDC and I agree that being Child, Youth, and Family Centered will be central to my role.

Signed _____ Date _____

T-Shirt Size: XS S M L XL 2X 3X

For office use only

Notes

Volunteer Position _____

Volunteer Interview _____

Volunteer Role Description sent _____

References Collected _____

Volunteer Start Date _____