

# Volunteer Application

## CMHA, Kamloops



### Contact Information

Name	
Street Address	
City and Postal Code	
Home Phone	
Cell Phone	
Email Address	

### Availability

During which hours are you available to volunteer?

- Weekday mornings       Weekend mornings  
 Weekday afternoons       Weekend afternoons  
 Weekday evenings       Weekend evenings
- Flexible  
 Only the following days/hours: \_\_\_\_\_

### Interests

Tell us which areas you are interested in volunteering:

- Office/Administrative       Fundraising  
 The Clubhouse       Merritt Clubhouse  
 Public Education       Events and Promotions  
 Other (please include your volunteering areas of interest):  
\_\_\_\_\_  
\_\_\_\_\_

### Special Skills or Qualifications

Summarize any skills and/or qualifications you have gained from employment, previous volunteer work, or through other activities, including hobbies or sports that you think will benefit your volunteer application.

#### Skills:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

#### Qualifications:

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## About Yourself...

Education History:

Work Experience:

## References

Please provide us with two references.

1. \_\_\_\_\_  
Name Relationship to you Phone #
2. \_\_\_\_\_  
Name Relationship to you Phone #

**CMHA, Kamloops requires all volunteers to complete a Criminal Record Check.**

## Person to Notify in Case of Emergency

Name	
Street Address	
City and Postal Code	
Home Phone	
Cell Phone	
Email Address	

## Agreement and Signature

By submitting this application, I affirm that the facts set forth are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my dismissal.

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Thank you for your interest in CMHA, Kamloops.  
We will contact you once we have reviewed your application.**