



VOLUNTEER APPLICATION

Personal Information: (Please print)

Last Name:		First Name:	
Email Address:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Prefer not to say	
Home Address:		Postal Code	
Phone # (Home):		Phone # (Cell):	
Country of Origin:		1st Language:	Other Languages:
Name(s) of Child(ren)		Grade(s):	
1.		Grade:	
2.		Grade:	
3.		Grade:	

Education, Volunteer History & Employment History (Please include out of country experience Role/Organization/Dates (if planning to send your resume simply write: "see resume")

Education:
Work Experience:
Volunteer Experience:

Are there Special Interests/Skills/Hobbies that you wish to contribute through this volunteer experience?

Volunteer Opportunities (please check your preferences)

<input type="checkbox"/> Special Events – Provide assistance where needed with Almadina events. Tasks may include: venue set-up, decoration, putting up tables and chairs, registration, and many more one-time opportunities.
<input type="checkbox"/> Administrative Support – Previous office or customer service experience and resume are required. Duties such as responding to enquiries, upgrading files, photocopying and other types of paperwork are needed in our office throughout the year.
<input type="checkbox"/> Guest Speakers and Guest Group Facilitators – Unique skills and experience may be a great fit for a workshop for Almadina. Some special skills include: sewing, knitting, peer mentorship, other languages.
<input type="checkbox"/> One to one Tutoring – if you have experience in teaching or tutoring you are encouraged to apply

Availability (note: most volunteer shifts are during the day and Monday through Friday):

<input type="checkbox"/> Regular	<input type="checkbox"/> Flexible	<input type="checkbox"/> Part Time	<input type="checkbox"/> One Time Only
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Monday	Tuesday	Wednesday	Thursday	Friday
<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning	<input type="checkbox"/> Morning
<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Afternoon

Applicant's Signature: _____

Date: _____