



Volunteer Application

15 Sir Winston Churchill Square, Edmonton, AB T5J 2E5
 Phone: 780.423.5510 Fax:780.426.5175 volunteer@mysage.ca

Date of Application: _____

www.mysage.ca

Applicant Contact Information

Name	
Street Address	
City / Postal Code	
Home /Work phone	
Cell Phone	
E-Mail Address	

Please indicate your area of interest – where would you like to volunteer?

- | | |
|---|---|
| <input type="checkbox"/> Reception | <input type="checkbox"/> Income Tax Clinic |
| <input type="checkbox"/> General Office Work/Data Entry | <input type="checkbox"/> Casino |
| <input type="checkbox"/> Security | <input type="checkbox"/> Events or Projects |
| <input type="checkbox"/> Fundraising | Helping clients fill out forms |
| <input type="checkbox"/> Life Enrichment Programming | Others: please specify _____ |

Availability

Sage would like a commitment of one 4 hour shift per week. What days **are you available** for a shift?

- | Mon | Tues | Wed | Thurs | Fri |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. | <input type="checkbox"/> a.m. |
| <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. | <input type="checkbox"/> p.m. |

Interests and Abilities – Check all that apply:

- | | |
|--|--|
| <input type="checkbox"/> Enjoy working with older adults | <input type="checkbox"/> Familiar with computer programs |
| <input type="checkbox"/> Patient | <input type="checkbox"/> Attention to detail |
| <input type="checkbox"/> Friendly/Outgoing | <input type="checkbox"/> Comfortable handling cash and operating a cash register |
| <input type="checkbox"/> Enjoy helping people | <input type="checkbox"/> Comfortable with change |
| <input type="checkbox"/> Like to talk on the phone | <input type="checkbox"/> Comfortable with face to face interactions |
| <input type="checkbox"/> Familiar with operating a credit card/debit machine | <input type="checkbox"/> Ability to de-escalate a situation |
| <input type="checkbox"/> Ability to multi-task and maintain accuracy | Leading a group |
| <input type="checkbox"/> Flexible | |

What other hobbies, interests and abilities would you like us to know about?

Please summarize your previous volunteer experience:

Why would you like to volunteer with Sage?

References

1. Reference Name			
Relationship		Telephone	
Email			
2. Reference Name			
Relationship		Telephone	
Email			

Agreement and Consent

By submitting this application, I affirm that the information provided is true and complete to the best of my knowledge. I understand that submitting my application does not guarantee my acceptance and I agree to participate in further screening to assist Sage in determining my suitability for any volunteer position. 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 immediate dismissal. **I authorize Sage to contact my references to assess my qualifications for a volunteer position.**

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual orientation, age, or disability. The purpose of the initial interview will be to determine the qualifications, ability, and suitability of the individual to perform work on behalf of Sage. Thank you for completing this application form and for your interest in volunteering with Sage.