



Volunteer Application

Personal Information:

Last Name:	Given Name(s):	
Address:		
Home Telephone:	Alternate Number:	
Email Address:		
<input type="checkbox"/> High School Student	<input type="checkbox"/> College/University Student	<input type="checkbox"/> Non-Student

What specific areas of interest do you have (e.g. health issues and/or target groups)?

Briefly summarize your strengths and abilities as they relate to volunteering.

Please outline the objectives and goals that you have for volunteering.

A healthier future for all.

Previous Related Practicum / Placement / Employment Experience:

Document any past experience that is related to the volunteering applied for. Attach additional pages if necessary.

<p>1. Employer / Supervising Organization: _____</p> <p>Type of Experience: <input type="checkbox"/> Employment <input type="checkbox"/> Placement / Practicum <input type="checkbox"/> Other _____</p> <p>Description of Experience:</p>
<p>2. Employer / Supervising Organization: _____</p> <p>Type of Experience: <input type="checkbox"/> Employment <input type="checkbox"/> Placement / Practicum <input type="checkbox"/> Other _____</p> <p>Description of Experience:</p>

Signature: _____ Date: _____