



Volunteer Application Form

Name: _____

Address: _____

Telephone: Home: _____

Work: _____

Cell: _____

Email: _____

How did you hear about Family SOS?

What do you expect to gain from your volunteer experience at Family SOS?

Special Accommodations Required:

Areas of Interest:

Fundraising/Development

Maintenance Work

Program Development

Administration

Event Planning

Marketing/Communications

Parenting Groups

Other (please specify):

Please indicate your availability:

Monday	Tuesday	Wednesday	Thursday	Friday
AM:	AM:	AM:	AM:	AM:
PM:	PM:	PM:	PM:	PM:

References: List three (3) people that you have known, other than family members, for at least six months and to whom we may refer.

1. Name: _____
Telephone: _____
Email: _____
Relationship: _____
2. Name: _____
Telephone: _____
Email: _____
Relationship: _____
3. Name: _____
Telephone: _____
Email: _____
Relationship: _____

I hereby give Family SOS permission to approach my references for comments as to my suitability as a volunteer with this agency: YES NO

Volunteering Screening

Volunteers are expected to apply for a Criminal Record Check and if working with children, a Child Abuse Registry. The series of the following steps will be followed prior to you starting your volunteers work. You will be asked to:

1. Complete and application/volunteer information form, or send resume.
2. Return the volunteer application form to:
Family SOS
2006 Gottingen Street
Halifax, NS B3K 3B1
Fax: (902) 455-7190, or sarah@familysos.ca
3. Attend a short interview
4. Attend an orientation session to introduce you to the organization and cliental.

Thank you for your interest in Family SOS!