

South Winnipeg Seniors Resource Council Volunteer Application Form



SOUTH WINNIPEG SENIORS RESOURCE COUNCIL

Contact Information

Name	
Street Address	
City, Postal Code	
Home Phone	
Work Phone	
Cell phone	Do you use TEXTING? YES__ NO__
E-Mail Address	
Preferred method Of Communicating?	__ Home Phone __ Work Phone __ Cell Phone __ Text __ Email

General

Tell us why you are interested in being a part of SWSRC:

Please indicate as a YES or a NO regarding your interest in serving on:

YES / NO

___ / ___ Task / Project Group

___ / ___ Committee

___ / ___ Board

___ / ___ All of the above

How much time can you commit to the Council on a monthly basis?

*Including attending and preparing for meetings, and attending some additional events or board related activities, how much time are you able to commit to the Council on a monthly basis?

- Project Working Groups: 2 hours 4 hours 6 hours
- Meeting Preparation: 2 hours 4 hours
- Committee Meetings: 2 hours 4 hours
- Monthly Board meeting: 3 hours

Previous Volunteer / Board Experience

Summarize your previous volunteer experience, the organization and positions you have held.

Current Volunteer Work

If you are presently volunteering, please indicate the organization, the length of time you have been volunteering and the role you are performing:

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities that relate to community development or working with seniors.

Previous or Current Employment

Summarize your previous or current employment

If required, would you be willing to do a criminal record /vulnerable persons check?

Please indicate: YES ___ or NO ___

To assist us in matching your skills to meet the needs of the Council, please describe your skills in any of the following areas that are relevant to you.

Administration / office duties	
Chairing Committees	
Comfortable speaking & sharing in a group setting	
Community Development & Involvement	
Educating and Training / Delivering Presentations	
Event Planning	
Food Services	
Facilitating Group Activities and Discussions	
Finance	
Fundraising / Grant writing	
Human Resources	
Interest in seniors and an understanding of the healthcare system	
Marketing, Advertising, Writing, Promotion / Public Media	
Strategic Planning	
Volunteer Development	
Writing minutes	
Website – database mgm	
Website - programming	
Hobbies?	
Interests?	
Special Skills?	

References: Please provide the names and contact information for two (2) references.

Reference 1

First Name: _____ Last Name: _____

Email Address: _____ Phone: _____

How do you know this person?

Reference 2

First Name: _____ Last Name: _____

Email Address: _____ Phone: _____

How do you know this person?

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it 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 immediate dismissal.

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 preference, age or disability.

Thank you for completing this application form and for your interest in volunteering with SWSRC.

Please submit this completed application to: **South Winnipeg Seniors Resource Council
117 – 1 Morley Avenue,
Winnipeg, MB R3L 2P4
Attention: Resource Coordinator**

Any questions?

Contact the Resource Coordinator at: **204-478-6169** or resources@swsrc.ca