

VOLUNTEER APPLICATION

Date of Application: _____

Applied at (please check one): ☐ 70 Princess St. ☐ 1540 Pembina Hwy ☐ 3431 Portage Ave.
☐ 16 Main St., Ashern, MB ☐ 317 St. Anne's Rd. ☐ Email ☐ Online (website) ☐ Fax

PERSONAL INFORMATION

First Name	Last Name	Home Phone	Cell/Other

Address (Street)	Apt	City	Province	Postal Code

Are you entitled to work in Canada? Yes ☐ No ☐

Email _____

Please indicate languages spoken and written: _____

Do you have a valid Drivers License? (Only if applicable for position) Yes ☐ No ☐

VOLUNTEER POSITION DESIRED

What position are you applying for? (Please check all that apply):

☐ Retail Clerk ☐ Production/Warehouse ☐ Driver Assistant ☐ Administration ☐ Other

Are you available for? ☐ Full Time ☐ Part Time

What is your availability?:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
From							
To							

Have you ever been employed by Canadian Goodwill Ind. before? Yes ☐ No ☐

If Yes:

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Date From

To

What was your position when you left?

What source referred you to this company? _____

EDUCATION

High School:

NAME OF SCHOOL	# OF YEARS COMPLETED	FROM	TO	GRADE 12 DIPLOMA
				Yes ☐ No ☐

Post Secondary:

NAME OF INSTITUTION	# OF YEARS COMPLETED	FROM	TO	MAJOR / MINOR

Degree(s) / Certification(s):

Additional Courses, Seminars, Work Shops (if applicable):

Describe any work related skills, experience or training that is related to the position being applied for:

EMPLOYMENT RECORD (MOST RECENT EMPLOYER FIRST)

COMPANY NAME

ADDRESS

PHONE NUMBER

JOB TITLE

LENGTH OF EMPLOYMENT:

From

To

REASON FOR LEAVING

DUTIES / RESPONSIBILITIES

IMMEDIATE SUPERVISOR:

First Name

Last Name

Phone #:

Email #:

MAY WE CONTACT?

YES ☐NO ☐

SALARY/WAGE :

COMPANY NAME

ADDRESS

PHONE NUMBER

JOB TITLE

LENGTH OF EMPLOYMENT:

From

To

REASON FOR LEAVING

DUTIES / RESPONSIBILITIES

IMMEDIATE SUPERVISOR:

First Name

Last Name

Phone #:

Email #:

MAY WE CONTACT?

YES ☐NO ☐

SALARY/WAGE :

COMPANY NAME

ADDRESS

PHONE NUMBER

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LENGTH OF EMPLOYMENT:

From

To

REASON FOR LEAVING

DUTIES / RESPONSIBILITIES

IMMEDIATE SUPERVISOR:

First Name

Last Name

Phone #:

Email #:

MAY WE CONTACT?

YES ☐NO ☐

SALARY/WAGE :

REFERENCES**LIST TWO REFERENCES TO WHOM WE MAY REFER (NON-RELATIVES):**

1) NAME	OCCUPATION	TELEPHONE
2) NAME	OCCUPATION	TELEPHONE

OUTSIDE HOBBIES AND INTERESTS, SERVICE CLUBS OR PROFESSIONAL ASSOCIATIONS**APPLICANT DECLARATION AND AGREEMENT**

I hereby declare that the information provided in this Volunteer Application is true, complete, and accurate to the best of my knowledge. I understand that any false, misleading, or omitted information may result in the withdrawal of my application or termination of my volunteer placement. I acknowledge that submitting this application does not guarantee acceptance into a volunteer position. If accepted, I agree to comply with all organizational policies, procedures, safety requirements, and standards of conduct. I understand that I am responsible for maintaining the confidentiality of any sensitive information I may encounter during my volunteer service. By signing below, I confirm that I have read, understood, and agree to the terms outlined above.

SIGNATURE

DATE

****All new Canadian Goodwill Volunteers may be subject to a criminal record check****