## **THE BRIDGES SOCIETY** Supporting Those with Mental Health Needs

BRIDGES is a charitable, non-profit society founded in 1996 by a small group of concerned parents and Alberta Mental Health staff to address the lack of support for adults with mental illness. The society has evolved over the years and has offered different kinds of services (such as housing and employment support). We are now a social outreach centre with recreation activities, events and a community meal program.

The BRIDGES Society provides support, community-based programming, information and understanding to everyone looking to connect with community for the support of their mental health and wellness.

It is our mission to provide a safe environment with support services for people with mental health needs. Our vision is to uphold excellence in mental health and wellness for the Hinton community.

## **VOLUNTEER APPLICATION FORM**

This information is collected to determine eligibility for BRIDGES volunteer opportunities. It will be protected in accordance with the Freedom of Information and Privacy Act. We welcome resumes and other documentation that lets us learn more about you and your personal and professional goals!

Date:		
First Name:	Last Name:	
Address:		
	Postal Code:	
Telephone: Home	Cell	Other
Email Address:		
GENERAL INFORMATION:		
Current Status: <i>Employed</i>	_ Homemaker Unemploye	d Retired Student
-	nteer opportunities at BRIDGES	
	r at BRIDGES?	
Type of volunteer work you a	re interested in (check all that a	apply):
Board Member Adminis	trative Recreation W	Vorking w/clients Custodial
Computers Cooking/Ba	king Special Events	_ Teaching Fundraising
Availability: <i>(please specify)</i>	Mornings	Afternoons
	Evenings	Weekends

## WORK HISTORY:

## **INTERESTS/HOBBIES/ACTIVITIES:**

What skills do you have that you would like to use in volunteering? What skills would you like to develop? *(e.g. public relations, teaching, organizing events, computer skills, marketing, helping others, musical talents, etc.)* 

EMERGENCY CO	NTACT:			
Name:	Address:			
Phone Number:	Relationship:			
<b>REFERENCES</b> :	NCES: (Not related to you, e.g. employer, clergyman, long-term friend)			
Name:	Phone number:	Relationship:		
Name:	Phone number:	Relationship:		
	FORMATION YOU WOULD LIKE TO PROV			
I hereby attest BRIDGES Socie	that the above information is true to the	he best of my knowledge. I give the ses for information on my previou		

BRIDGES Society permission to contact my references for information on my previous employment, education and volunteer experience. If accepted as a volunteer, I agree to a criminal record check. I also consent to the release of photographs, video or other visual aids that I may be pictured in to be used for recognition or promotional purposes.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for your interest in volunteering at BRIDGES. All applications will be reviewed and considered for current volunteer opportunities. We will keep your application on file for six months.