**VOLUNTEER APPLICATION FORM**

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| **Last Name** |  | **First Name** |  |
| **Phone Number** |  | **Email** |  |
| **Address** |  | **Program****\*Check one** | **Tutoring ( ) Mentoring ( )****Both ( )** |
| **Birthday** |  |  |  |

**Please complete the following and bring it to your interview session:**

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| **Program Information** |

**(*TUTORING only*) Which grade(s) do you feel most confident in working with? *(Please check one)***

 Grade 1/10 ( ) Senior – Grade 11/12 ( ) All grades ( )

**(*TUTORING only*) What subject(s) would you like to be tutoring? *(Check as many as applicable)***

English/ESL ( ) French ( ) Math/Algebra/Functions ( ) Physics ( )

Social Science/Geography/History ( ) Science/Biology/Chemistry, etc. ( )

Other:

**(*TUTORING only*) Tutoring takes place Mondays to Thursdays, 4 pm to 7 pm. Which day(s) are you available?**

Mondays ( ) Tuesdays ( ) Wednesdays ( ) Thursdays ( )

**(*MENTORING only*) Would you briefly explain your previous mentoring/counseling/youth work experience?**

**(*Mentoring only*) In your opinion, what skill(s) make(s) a good mentor to youth in high school?**

**(*Mentoring only*) Mentoring takes place MONDAY THROUGH THURSDAY (grade 1s) THROUGH (grade 10s), from 3:45 (arrival) until 7:00 pm. Which day(s) are you available?**

 DAYS AVAILABLE ( )

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| **General Information** |

**How did you hear/know about the MLC?**

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**Reasons for volunteering with MLC *(Check as many as applicable)*:**

Give back to the community ( )

To build job skills ( )

Include in my resume ( )

Future opportunities ( )

Learn something new ( )

Other

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| **References** |

***REFERENCE 1*Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Relationship to the applicant: *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***REFERENCE 2*Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Relationship to the applicant: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Skills**  |

**Do you speak a language other than English? What language(s)?**

**Do you have specific skills or trainings working with community?**

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| **Thank you so much for your volunteer inquiry! If you have questions, please contact us at**(905) 746-1760 ***ASHA DIRIR***, mentoring OR ***GALER ABDULLE***, volunteer coordinator, 647-893-4772 **To assist you with any questions and concerns about our programs and your experience with us. We are very excited to have you in our team!**  |

**(Interview) Date: Applicant Signature:**

**Training Date: Pathways Staff Signature:**