

## Town of Prescott Volunteer Application Form

Applicant Form							
<ul> <li>New Volunteer</li> </ul>				Position/Group Applying for:			
<ul> <li>Returning Volu</li> </ul>							
First Name     Last Name							
Address							
City		Province			Postal Code		
Telephone No. (Home		Telephone No. (Work)			Telephone No. (Cell)		
Email Address							
Preferred method of contact:					() Email		
Emergency Contact		Telephone No.					
Languages							
○ English ○ French ○ Other							
Spoken C	) Spoken Written	○ Spoken ○ Written					
	whiten	U whiten					
Availability							
Please check the days and times when you are available to volunteer. Check all that apply.							
Day	AM	, PM	Evening	Time of Ye			
Monday				□ All	year round		
Tuesday				🗆 Su	mmer (July-August)		
Wednesday				🗆 Fal	ll (September-December)		
Thursday				🗆 Wi	inter (January-March)		
Friday				🗆 Sp	ring (April-June)		
Saturday							
Sunday							
References							
I authorize the Corporation of the Town of Prescott to contact the persons or organizations listed below for the purpose of obtaining reference information. Relatives are not accepted for reference purposes.							
Applicant's initials:							
Name		Phone No.	Phone No.		Relationship to Applicant		
		Email Address			(i.e., supervisor, teacher, etc)		
Name		Phone No.			Relationship to Applicant		
		Email Address			(i.e., supervisor, teacher, etc)		
Name		Phone No.			Relationship to Applicant (i.e., supervisor, teacher, etc)		
		Email Address					
Skills and Qualifications:							



Interests and Hobbies:	
Pertains to those applying for Boards and Committee ON	LY
Are the owner or tenant or the spouse of an owner or	o Yes
tenant of land in the Town of Prescott?	0 <b>No</b>
Are you 18 years of age or older?	o Yes
	0 <b>No</b>
Have you included your mandatory Criminal Record	o Yes
Check?	0 <b>No</b>
Are you legally entitled to work in Canada?	o Yes
	0 <b>No</b>

Volunteer Application Forms are kept on file for six months from date of receipt.

## Notice of Collection:

Personal information, as defined by the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) is collected under the authority of the Municipal Act, 2011, and in accordance with the provisions of the MFIPPA. Personal information on this form will be used to assess the applicant's eligibility for volunteer positions or qualifications for appointment to one of the various committees or boards. At no time will your personal information be disclosed without your express written consent. Questions regarding the collection, use and disclosure of this personal information may be directed to the Clerk's Office, Town of Prescott, 360 Dibble Street West, Prescott, ON, KOE 1T0, 925-2812. Declaration: I hereby declare that the foregoing information is true and complete to my knowledge. I understand that a false statement may disqualify me from volunteering, or may cause my dismissal from volunteering. Signature: Date: Thank you for considering volunteering with the Town of Prescott. Please complete and return by mail, email or fax: Town of Prescott, 360 Dibble Street West, Prescott, ON, KOE 1T0, <u>sjoudoinmiller@prescott.ca</u>, 925-2812 ext. 6230.

Signature:

Date:

## Thank you for considering volunteering with the Town of Prescott.

Please complete and return by mail, email or fax:

## **Town of Prescott**

360 Dibble Street West Prescott, ON K0E 1T0 Phone: 613-925-2812 ext. 6230 Fax: 613-925-4381 sjoudoinmiller@prescott.ca