



## VOLUNTEER APPLICATION

### Personal Information:

Name: \_\_\_\_\_  
Please print

Address: \_\_\_\_\_  
Suite/Street City Province Postal Code

Mailing Address (if different from above): \_\_\_\_\_

Telephone Home: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_\_  
dd/mm/yyyy

Emergency Contact Person: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Present of Former Occupation: \_\_\_\_\_

Education: \_\_\_\_\_

### Volunteer Information:

Language Written/Spoken: \_\_\_\_\_

Are there any limitations which may affect your volunteer assignment? \_\_\_\_\_

Availability for Volunteer Services: 1-3 Months  3-6 Months  6+ Months

Hours per week \_\_\_\_\_ Preferred Hours: AM  PM  No Preference

What kind of volunteer positions interest you \_\_\_\_\_

Do you have any previous/present experience as a volunteer? If yes, in what capacity?

Please list the skills, talents, interests, or resources that you would happily share as a volunteer.

What things would you want to learn, experience, see and do, as part of your volunteer experience and what would you hope to gain in your volunteer with us?

Please list the conditions, experiences or limitations which would make you say no to volunteering?

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Is there anything else you would like to share with us?

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**References:**

***Personal Reference:***

Name: \_\_\_\_\_

Telephone Home: \_\_\_\_\_ Work: \_\_\_\_\_

Relationship: \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

***Family Reference:***

Name: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Relationship: \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

***Work/Volunteer Reference:***

Name: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Work: \_\_\_\_\_

Relationship: \_\_\_\_\_

How long have you known this person? \_\_\_\_\_

I consent to a criminal record check and/or personal reference check to be done in keeping with REDI Enterprises Society's stand on the protection of clients. I acknowledge that some of this information may be shared with others on a "need to know" basis.

I am willing to abide by the rules and Regulations of REDI Enterprises Society including ensuring that confidentiality is preserved while on duty and after duty has ended.

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
REDI Enterprises Representative

\_\_\_\_\_  
Date

Please email your application to [takeflight@redi.ca](mailto:takeflight@redi.ca), or you can drop it off with reception at 860 Allowance Avenue SE, Medicine Hat.