

Ontario Ministry of Community Safety & Correctional Services

Volunteer Appointment Application

Name (Last, First, Middle)		
Address, City, Postal Code		Home Telephone No.
Is it convenient to telephone you at your place of business? Email Address (If applicable)		Work Telephone No.
Languages spoken (X)	Do you have the use of a car?	
What hobbies and recreational activities do you enjoy?		
Have you any academic or other qualifications or experience(s) which you feel you could utilize as a	volunteer?	
Affiliation with community groups (service organizations, etc.)		
Any previous volunteer experience?		
How did you learn of our program?		
My preference for volunteer involvement would be with Why do you wish to be a volunteer in this program?		
Reference Name		Telephone No.
Address	Occupation	1
Reference Name	1	Telephone No.
Address	Occupation	•
In making this application I hereby give the Ministry of Community Safety and Correctional Services references and to make enquiries with the police authorities as may be deemed necessary to ascerta		lunteer.
Signed		Date day month year