

Your main reasons for volunteering here are:

- Help others
- Co-op requirements
- Keep busy
- Learn new skills
- Meet new people
- Be challenged
- Have been a client
- Explore career opportunities
- Other, specify

How did you hear about volunteering with CCHS?

- CCHS Staff
- CCHS Volunteer
- CCHS Program or Service
- School
- Volunteer Ottawa
- Other (specify)
- Friend
- Flyers
- Board Member
- AGM / meeting

Availability (check all that apply)

Day	Monday	Tuesday	Wednesday	Thursday	Friday
AM (9-12)					
PM (12-5)					
EVE (5-8)					

I am available to volunteer for: 3 months (minimum) 6 months 1 year

I am not available during the following month(s): _____

I prefer to volunteer with:

- Children Youth Adults Seniors Males Females
- No preference

Are there any groups you are uncomfortable volunteering with?

Your Skills:

-
-
-
-

Your Hobbies/Interests:

-
-
-
-

REFERENCES (exclude family members)

I agree to have the following references contacted by the Volunteer Program pursuant to the Freedom of Information Act.

Name	Relationship	Phone (h) (o)	Email address: _____
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Name	Relationship	Phone (h) (o)	Email Address: _____
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Signature _____

(Parental / Guardian consent required for persons under the age of 16)

PLACEMENT INFORMATION

Team:
Volunteer Role:
Staff Supervisor: