



330 Ellis Street
 Penticton, BC V2A 4L7
 250.492.5814
 OneSkyCommunity.com

Volunteer Application

Name (first) _____ (last) _____

Address _____

City _____ Postal Code _____

Phone (home) _____ (cell) _____

Email _____

Best way to contact you: Phone Cell Email

Languages (other than English)

Spoken _____ Written _____

Do you smoke? Yes No Allergies (pets, etc.) _____

Are you willing to undergo a Criminal Record Check? Yes No

Are you willing to complete a minimum of 8 hours training? Yes No

How did you learn about OneSky?

Why do you want to volunteer with OneSky?

Please tell us about any interests, special skills, computer knowledge or experience you bring.

Describe your previous volunteer experience(s).

Four horizontal lines for describing previous volunteer experience.

Please list your previous employment experience(s). Attach your resume, if available.

Five horizontal lines for listing previous employment experience.

Please identify any health or physical restrictions that may affect your volunteer activity

Three horizontal lines for identifying health or physical restrictions.

Please indicate the service(s) are you interested in volunteering for:

- Services to children
- Services to youth
- Services to adults
- Administration
- Transportation
- Training
- Events support
- Fundraising
- Technology support
- Property maintenance
- Property repairs

Other _____

Availability & Preference

- Short term basis (up to six months)
- Long term basis (longer than 6 months)
- Regular assignment (once a week)
- Occasionally (as needed & available)

If you have a regular schedule, please indicate your availability

| Day | Mon | Tues | Wed | Thurs | Fri | Sat | Sun |
|------------|-----|------|-----|-------|-----|-----|-----|
| Mornings | | | | | | | |
| Afternoons | | | | | | | |
| Evenings | | | | | | | |

How many hours per week or month would you like to volunteer? _____ /week _____ /month

What are your choices regarding the communities/areas in which you would like to volunteer?

Do you have any restrictions on travel/transportation (please explain)?

Do you have any other considerations regarding availability?

Please provide three employer, volunteer or personal reference names and phone numbers.

Name: _____ Phone _____

Name: _____ Phone _____

Name: _____ Phone _____

I hereby consent to OneSky Community Resources collecting and using the personal information supplied above solely to provide, or inform me about, programs, services and events or for statistical purposes.

Signature _____ Date _____

Office Use:

Date Received: _____ 20 ____ . Initials _____

Forwarded to: _____