



The Salvation Army
 Canada & Bermuda
 British Columbia Division

103 - 3833 Henning Drive Burnaby BC V5C 6N5
 Tel: (604) 299-3908
 Fax: (604) 291-0345
 www.SalvationArmy.ca

Public Relations & Development

Giving Hope Today

Volunteer Application Form

PLEASE PRINT CLEARLY

First Name: _____ Last Name: _____
 Street Address: _____ Apartment/Unit #: _____
 City: _____ Province: _____ Postal Code: _____
 Home Phone: _____ Cell Phone: _____
 Email Address: _____ Are you over the age of 16? Yes No

PREVIOUS EMPLOYMENT

Have you previously worked or volunteered for The Salvation Army? If Yes, complete section below.

Name of Location: _____ City: _____ Years of Service: _____
 Type of Activity: _____

EDUCATION

School	Address	Years	Program

EMPLOYMENT HISTORY

Company: _____ Position Title: _____
 Years: _____ Location: _____
 Responsibilities: _____
 Company: _____ Position Title: _____
 Years: _____ Location: _____
 Responsibilities: _____

RECORDS

Check if you need your hours logged: Community Service for School Court-ordered Service

SELF-DECLARATION

Have you ever been convicted of a criminal activity of a violent, sexual or theft nature? Yes No

AVAILABILITY

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Afternoon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Evening	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EMERGENCY CONTACT INFORMATION

Names of person(s) to call in case of an emergency: _____
 Relationship: _____ Phone: _____ Email: _____



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REFERENCE (OTHER THAN FAMILY MEMBER)

Name: _____ Relationship: _____ Phone: _____
Name: _____ Relationship: _____ Phone: _____

KEEP IN TOUCH

Would you like to receive information about other volunteer opportunities: Yes No

DISCLAIMER AND SIGNATURE

I certify that my answers are true and complete to the best of my knowledge. If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.

Applicant Signature: _____ Date: _____