



# Volunteer Application Form (Please print)

## Personal Information

Today's Date \_\_\_\_\_ Yes, I am over 15 years of age \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Do you have a Criminal Record Check? Y\_ N\_ Do you have a child abuse registry letter? Y\_ N\_

Employer \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

How did you hear about Adsum? \_\_\_\_\_

### What are you interested in doing at Adsum? [Check all that apply]

#### Adsum House - 2421 Brunswick St

- Organizing clothing room(1PM-3:00)
- Sorting donations - AM or PM
- Lunch preparation (10AM-12:00)
- Dinner preparation (3PM-5:00)
- Baking
- Light housekeeping
- Painting / home improvement projects
- Holiday meal preparation

#### Special event committee or day of volunteer:

- Art show - March
- Females Fore Females Golf - June
- Dinner / silent auction – October
- Christmas Wrapping - December

#### Relevant volunteer experience:

\_\_\_\_\_  
\_\_\_\_\_

**Availability – Volunteers typically work a 2-hr. shift per week. When are you available to start** \_\_\_\_\_

Please indicate your weekly availability between 9:00am and 8:00pm.

|           |  |          |  |
|-----------|--|----------|--|
| Sunday    |  | Thursday |  |
| Monday    |  | Friday   |  |
| Tuesday   |  | Saturday |  |
| Wednesday |  | Notes    |  |

**References**

Please do not include relatives.

1. Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Relationship to you: \_\_\_\_\_

2. Name: \_\_\_\_\_

Organization: \_\_\_\_\_

Phone: \_\_\_\_\_

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

Relationship to you: \_\_\_\_\_

**Thank you for your interest in being a part of the Adsum volunteer team! We look forward to working with you.**

**You will be contacted to arrange a Volunteer Orientation. Please bring along a drivers license and if you have a current police check and child abuse registry letter.**

Please return this form to:

Sarah MacArthur, Adsum for Women & Children 2421  
Brunswick St. Halifax NS B3K 2Z4  
fax 902-423-9336  
email [adsum@adsumforwomen.org](mailto:adsum@adsumforwomen.org)

Questions? Please call 902-423-5049

**For office use only:**

|                                      |
|--------------------------------------|
| Police record check complete:        |
| Child Abuse Registry check complete: |
| Orientation date:                    |
| Start date:                          |
| Scheduled date/time:                 |