



counselling + family services

400 Queen Street South, Kitchener, Ontario N2G 1W7

## VOLUNTEER APPLICATION

Mosaic Mission Statement: Mosaic Counselling and Family Services exists so that people find the strength, skills and confidence to deal with life's challenges and opportunities.

### Personal Information

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Given Name(s)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
Postal Code

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

\_\_\_\_\_  
Business Phone

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

\_\_\_\_\_  
E-mail

What is the best way to contact you? \_\_\_\_\_

\_\_\_\_\_  
Date of Birth (optional - for statistical and recognition purposes)      Age Range     18 or under     19-55     55+

### Emergency Contact

\_\_\_\_\_  
Name

\_\_\_\_\_  
Relationship

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

\_\_\_\_\_  
Business Phone

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

### Volunteer Experience

Have you volunteered before?     Yes     No

If yes, please identify:

Organization(s) \_\_\_\_\_ Time Period \_\_\_\_\_

Type of Volunteer Experience \_\_\_\_\_

Why are you interested in volunteering at Mosaic \_\_\_\_\_

What type of volunteer service are you interested in? \_\_\_\_\_

Availability:  Weekdays  Weekends  
 Mornings  Afternoons  Evenings

Commitment:  Special Events  Occasionally  Weekly/Regular Assignment

### Work/Educational Experience

Are you currently employed?  Yes  No  Full-Time  Part-Time

If yes, Where: \_\_\_\_\_ Role: \_\_\_\_\_

Previous work experience: \_\_\_\_\_

Are you currently in school?  Yes  No  Full-Time  Part-Time

School/College/University \_\_\_\_\_ Grade Level/Degree \_\_\_\_\_

Degree/Area of Specialization \_\_\_\_\_

### Skill and/or Interests

Please describe talents, hobbies, interests, skills: (second languages, software programs, public speaking, training, fundraising, certifications, etc)

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### References (No Relatives or Friends)

Name	Relationship	Daytime Phone Number
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Name	Relationship	Daytime Phone Number
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### Please read before signing:

- I understand that there may not be a suitable volunteer role available at this time and that my information will be kept on file for future opportunities
- I authorize Mosaic to contact the references I have provided and record information from this application into a volunteer management database
- I agree to provide a Police Record Check should one be required for the role that I accept
- I certify that all information included in this application is true and complete and I agree to perform all assigned and accepted responsibilities to the best of my ability in keeping with the values, goals and guidelines of Mosaic Counselling and Family Services.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signature (if under 18 years of age) \_\_\_\_\_ Date \_\_\_\_\_