

SUMMER 2017 VOLUNTEER APPLICATION FORM

INSTRUCTIONS

- **New Applicants:** Please fill out the application form carefully and submit it in person, by fax (604.664.1658) or by email (volunteer@placedesarts.ca). Place des Arts staff will contact you to set up an interview.
- **Current Volunteers:** Please update your personal information and skip to the scheduling section on page 2.
- **Deadline: Wednesday, May 31, 2017**
- Contact the Volunteer Coordinator at 604.664.1636 ext. 36 or volunteer@placedesarts.ca if you have any questions.
- This form is confidential when completed and will only be used for the purposes of the Place des Arts Volunteer Program.

PERSONAL INFORMATION

| | | | |
|--------------------------|--|--------------------------------|-------------|
| Name | | Application Date | |
| Address | | | |
| City | | Postal Code | |
| Phone | | Other Phone | |
| Email | | Are you 15 or older? | Yes No |
| Birthday (MM/DD/YY) | | Gender | M F |
| Health Concerns | | | |
| Special Needs | | | |
| Emergency Contact Person | | Emergency Contact Phone Number | |

Are you a current Place des Arts volunteer?

Yes

No

If yes, please skip to the "SCHEDULING" section on page 2.

Do you want to be added to Place des Arts' ongoing volunteer opportunities mailing list?

Yes

No

Where did you find out about this volunteer opportunity?

Why are you interested in volunteering as a Summer Art Camp Volunteer at Place des Arts?

Please list any volunteer or work experience that you may have (position, duties, organization, duration), especially if they relate to children or the arts.

| | | | |
|--|-----|---|---------------|
| Are you completing volunteer hours as part of your Career Preparation or Work Experience program at school? If yes, which school? | | | |
| | | | |
| Do you speak any languages other than English? If so, please list them and indicate at what level. | | | |
| | | | |
| Do you have training or experience in the following? Please check off all that apply. | | | |
| First Aid | CPR | ESL | Special Needs |
| What other training and skills do you have relevant to working with children? | | | |
| | | | |
| Please list any specific skills, training and interests you have relevant to the visual, literary and performing arts. (For example: dance, guitar, knitting, sewing, painting, pottery, musical theatre, etc.) | | | |
| | | | |
| Yes | No | I give permission for photographs of me taken during Place des Arts volunteer activities to be used by Place des Arts for promotion of Place des Arts programs. | |

| SCHEDULING | | | | | | |
|--|------------|------------|------------|---------------|----------|-----------|
| Please check off the shifts for the week(s) you are available to volunteer. Morning (M) = 7:45AM-12:15PM Afternoon (A) = 12:00PM-5:00PM Full Day (FD) = 8:30AM-4:00PM | | | | | | |
| Summer Fun! Art Camp | | | | | | ArtReach |
| July 4-7 | July 10-14 | July 17-21 | July 24-28 | July 31-Aug 4 | Aug 8-11 | Aug 14-18 |
| M | M | M | M | M | M | M |
| A | A | A | A | A | A | A |
| FD | FD | FD | FD | FD | FD | FD |
| Volunteers are expected to commit to a minimum of two weeks. Place des Arts will do our best to accommodate your schedule; however, the number of weeks you are scheduled for depends on the camp schedule. Please let us know as soon as possible if your schedule changes. | | | | | | |

| ORIENTATION SESSIONS | |
|---|--|
| Volunteers must attend an orientation session before their first shift. Please check off the date(s) you will be attending. | |
| Summer Fun! Orientation - Monday, June 26, 2017 - 4:30pm - 6:30pm (Mandatory for all July 4 - Aug 11 volunteers) | |
| ArtReach Orientation - Thursday, August 10, 2017 - 5:00pm - 6:00pm (Mandatory for all Aug 14 - 18 volunteers) | |

| REFERENCES | | | |
|---|--|---------------------|--|
| Please provide the contact information for a personal reference and a professional reference (for example: school counsellor or advisor, teacher, employer, supervisor, coach, volunteer or community group leader, tutor, etc) | | | |
| Name | | Email | |
| Phone | | Relationship to you | |
| Name | | Email | |
| Phone | | Relationship to you | |