

## **German-Canadian Care Home**

## **Volunteer Application Form**

2010 Harrison Drive, Vancouver, B.C. V5P 2P6 (604)713-6531 <a href="www.gcch,ca">www.gcch,ca</a>

Date:	<u></u>
Commitment Time: Minimum of three month	s required
	e cleared prior volunteering. Please obtain Consent m from the Director of Recreation and Volunteer
Tell us about yourself:	
Name:	
Address:	
City:	Postal Code:
Telephone Numbers: Home:	Cell:
Work:	Email:
Occupation (present or past):	
Are you a student? If so, where and what year /g	grade
Work or volunteer experience:	
Why are you interested in volunteering?	
What would you like to learn or experience?	
Areas of volunteer interest please specify: i.e. or companionship, sharing your talent, pet visits, g games, German outreach, & etc.:	

Special skil	ls, instrume	nts, interests	or hobbies:				
What langu	ages do you	speak?					
Please give	two person	al reference	s (other than	family):			
1. Name:	1. Name:Relationsh			Phone:			
2. Name:	Relationship:_			Phone:			
Who should	d we contact	in the event	of an emergen	cy?			
Name:	Relations			:Phone:			
Do you hav	e any health	problems or	restrictions th	at might affe	ect your vol	lunteering?	
Please Expl	lain:						
Length of c	ommitment:						
3 months (r	min)	in)6 months		_longer	not sure		
Time Avail	1	1 -	T		T		
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							
agree to part	icipate in ori	entation and		ons as reques	sted and to		y knowledge" confidentiality
Volunteer's S	ignature			Date			
Parents/guar	dian consen	t (required f	or volunteer	applicants	under the	age of 16)	
am aware tha German-Cana	at dian Care He	ome. I give m	ny approval of	has a this.	applied to b	ecome a vol	unteer with
Name of pare	nt/guardian (	please print):					
Signature:				Date	:		