



**Victoria Disability  
Resource Centre**  
*Promoting a new perspective on disability*

# VOLUNTEER APPLICATION

**Please attach an updated copy of your resume.**

Applicant's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City & Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

## IN CASE OF EMERGENCY

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_

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

## AVAILABILITY

	Mornings 9:00 am – 12:00 pm	Afternoons 12:00 pm – 4:00 pm	All Day 9:00 am – 4:00 pm
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			

Is there a particular type of volunteer work that interests you?

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

Please provide the Name and Contact Number for at least two references:

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

I understand that all volunteers at the Victoria Disability Resource Centre are required to have a Criminal Record Check completed and must sign an Oath of Confidentiality before starting at the VDRC.

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_