



# **VOLUNTEER APPLICATION FORM**

## How to Become a Volunteer

- 1. Complete a volunteer application form
- 2. Attend a personal interview with the coordinator of volunteers
- 3. Complete a successful criminal record check

## PLEASE PRINT CLEARLY

Which area(s) are	Regional or Electoral Area Special Events	Community Recreation – Adult/Seniors Services
you interested in	Emergency Support Services Program	Community Recreation – Children Services (0-12)
joining?	Community Champion	Community Recreation – Youth Services
How did you	🗖 A Current Volunteer 🛛 Other Muni	cipality 🗖 Website
learn about		
the RDOS?	🗖 Other	
I want to volur	nteer with the RDOS because:	

Last Name:		First Name:		Preferred N	lame:			
Cell Phone:	Alternat	te phone:		Email: (rec	quired)			
Age: (if under 19 years)								
Emergency Contact:	Relations	nip:	Cell Phone	9		Work Phon	e	
Date of birth (required for municipal insurance purposes):   YYYY/MMM/DD								
BC Driver's Licence?  yes no Class Do you have personal transportation?  yes no								
AVAILABILITY								
Please indicate below with a $\checkmark$ the days and time of day that you are most likely to be available for volunteer								
duties. This does not mean you will be expected to volunteer during these times – this helps us to determine the best times to schedule training and assignments.								
	onday	Tues	Wednesda	ay Thurs	day	Friday	Saturday	Sunday
Morning								
Afternoon								
Evening								
Comments:								



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<b>REFERENCES</b> Please provide two references (cannot be immediate family members), whom you have known for at least five (5) years (example: co-worker, friend, teacher, manager). These references will be contacted following your interview.							
Personal Reference:	Relationship	Telephone	Email				
Business Reference:	Relationship	Telephone	Email				

<b>SPECIAL SKILLS</b> Please list any special skills you have that will be an asset to RDOS.					

### Please read the following, sign, and date below:

Protecting your personal information is an obligation the Regional District of Okanagan Similkameen takes seriously. Our practices have been designed to ensure compliance with the privacy provisions of the Freedom of Information and Protection of Privacy Act (British Columbia) ("FIPPA"). Any personal or proprietary information you provide to us is collected, used and disclosed in accordance with FIPPA. Should you have any questions about the collection, use or disclosure of this personal information please contact: Manager of Legislative Services Regional District of Okanagan-Similkameen 101 Martin Street Penticton, BC

Phone: 250-492-0237

Your personal information collected during this process is subject under the FIPPA legislation and will not be shared or published.

The RDOS has my consent to contact the references I have identified in this application. I have contacted the above references to confirm their contact information and their willingness to provide a reference for me.

I acknowledge that the RDOS is under no obligation to accept me as a volunteer.

Applicant Signature

Parent/Guardian Signature (if applicant is under 18)

YYYY/MMM/DD

YYYY/MMM/DD

Email completed application form to <u>cs@rdos.bc.ca</u> or drop off at 101 Martin Street, Penticton.



@rdosrecreation



Last Updated October 24, 2022