****

**VOLUNTEER APPLICATION**

Submit completed applications using one of the following two methods:

***FAX TO: MAIL TO:***

 Volunteer Coordinator Volunteer Coordinator

 (403) 252-6591 Intercare Corporate Group Inc. Calgary Regional Corporate Office

 ***EMAIL TO:*** 501 – 5920 Macleod Trail S.W.

 kmerkowsky@intercarecorpgroup.com Calgary, AB T2H 0K2

|  |
| --- |
| **VOLUNTEER INFORMATION (PLEASE PRINT)** |
| **LOCATION DESIRED: AVAILABILITY: Please specify preferred** **[ ]** CHINOOK CARE CENTRE [ ]  FLEXIBLE 1261 Glenmore Trail SW[ ]  BRENTWOOD CARE CENTRE [ ]  PREFER WEEK DAYS / EVENINGS 2727 - 16 Avenue NW Please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  SOUTHWOOD CARE CENTRE [ ]  PREFER WEEKEND DAYS / EVENINGS 211 Heritage Drive SE Please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  KINGSLAND TERRACE SUPPORTIVE LIVING 835 - 68 Avenue SW  |

|  |
| --- |
|  |
| LAST NAME | FIRST NAME AND INITIAL |
| HOME ADDRESS | E-MAIL ADDRESS |
| CITY | PROVINCE | POSTAL CODE | TELEPHONE (HOME) |
| TELEPHONE (CELLULAR) | TELEPHONE (WORK) |
| EMERGENCY CONTACT (NAME / TELEPHONE NUMBER/ RELATIONSHIP) |

|  |
| --- |
| SKILLS AND INTEREST |
| EDUCATIONAL BACKGROUND:  |
| OCCUPATION: |
| INTERESTS / SKILLS / HOBBIES: |
| EXPERIENCE WORKING WITH SENIORS: Yes \_\_\_\_\_ No \_\_\_\_\_ |
| PREVIOUS VOLUNTEER EXPERIENCE: |

|  |
| --- |
| **PREFERENCE IN VOLUNTEERING** |
| **WHAT TYPE OF VOLUNTEER WORK ARE YOU INTERESTED IN?** [ ]  Working 1:1 with Residents [ ]  Leading a Recreation Program with Intercare staff available for support and assistance [ ]  Entertainment  [ ]  Mealtime Companion ***(specialized training required)*** [ ]  Pastoral Care ***(specialized training required)*** [ ]  Palliative Care ***(specialized training required)*** [ ]  Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [ ]  No Preference Do you have a preference for working with: Men [ ]  Women [ ]  No preference [ ]   |
| **WHICH AREAS WOULD YOU LIKE WORKING IN?** [ ]  Bingo/Bocce/Bowling [ ]  Sing-A-Long  [ ]  Crafts/Knitting/Sewing [ ]  Visiting  [ ]  Cards/Games/Puzzles [ ]  Social Programs (e.g. Pub Afternoon, Birthday Parties, Tea Parties)  [ ]  Assisting with Off Site Outings  [ ]  Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
|  |
| **PLEASE LIST TWO (2) NON-FAMILY REFERENCES FOR US TO CONTACT****(Please include: Name / Phone Number/ Email Address)**1. **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** 1. **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **APPLICANT’S SIGNATURE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  **DATE:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

This information is collected pursuant to the Intercare Corporate Group Inc. Privacy Policy

and its obligations under the Personal Information Protection Act.