

Reach for the Rainbow Volunteer Program Application

For Office Use Only Reg. # _____ HRIS # _____

Date received: _____

First Name: _____ Last Name: _____

Home ☎ _____ Work ☎ _____

Cell ☎ _____ Fax: _____

Occupation: _____

E-mail: _____

Address: _____

City: _____ Postal Code: _____

Intersection: _____

Emergency Contact Name & Relationship: _____

Contact ☎ _____

Transportation: Own Vehicle / Use of Vehicle Public Transportation Walk

1. How did you find out about Reach for the Rainbow's Volunteer Program?

2. What motivated you to apply to the **Reach for the Rainbow Volunteer Program**?

3. Please share any relevant skills and past volunteer experience you bring to this position:

4. Do you have physical restrictions that may affect your volunteering activities? (e.g. can't climb stairs) _____

Please check all of the volunteer positions that you would be interested in:

- Events-Planning & Organization
- Office and Administration
- Advocacy (public speaking)
- Event set-up/tear down-(physical)
- Fundraising
- Board/Committee Work

If applying for an ongoing volunteer position, please indicate the days and times when you would be available:

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
A.M.							
AFT.							
P.M.							

REFERENCES (employer, co-worker, teacher, family, friend)

#1 Name: _____

Daytime Phone: (____) _____

#2 Name: _____

Daytime Phone: (____) _____

I understand and agree that Reach for the Rainbow will request information from my references. I authorize my references to release all information as requested. Reach for the Rainbow ensures that personal information is kept confidential.

Applicant's Signature: _____ Date: _____

Please return to:
Reach for the Rainbow
Volunteer Development
20 Torlake Crescent
Etobicoke, ON M8Z 1B3
Tel: 416-503-0088
Fax: 416-503-0485

Email: volunteer@reachfortherainbow.ca