



CRANBROOK
HISTORY CENTRE

Volunteer Application

Date: _____

Personal Information

Full Name: _____
Last *First*

Address: _____
Street Address *Apartment/Unit #*

City *Province* *Postal Code*

Home Phone: _____ Alternate Phone: _____

Email: _____

Birth Date: _____ (must be 13 years of age to volunteer)

Emergency Contact Information

Full Name: _____
Last *First*

Home Phone: _____ Alternative Phone: _____

Relationship: _____

Availability

Please indicate the day and time when you are available

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

Date you are available to begin volunteering: _____

Volunteer Information

Interests: please check the areas you are interested in volunteering

- | | |
|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Tours | <input type="checkbox"/> Gardening |
| <input type="checkbox"/> Maintenance | <input type="checkbox"/> Archives |
| <input type="checkbox"/> Paleontology | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Events | |

Employment Experience: _____

Volunteer Experience: _____

Why are you interested in volunteering with the Cranbrook History Centre? _____

Summarize any other special skills and qualifications you believe we should know about:

References

Please provide the name and telephone number of two-character references.

Name: _____ Telephone: _____

Name: _____ Telephone: _____

Criminal Records Check

Are you prepared to have a criminal record check conducted if your position requires you to be alone with children/youth/seniors or handle sensitive information? (Individuals under 19 must have the criminal record check request form signed by a legal guardian).

Yes

No

Agreement and Signature

I, _____, authorize the Cranbrook History Centre to collect personal information appropriate to the opportunities applied for concerning my academic background and employment history, and to verify the character references I have supplied. This information is collected by the Cranbrook History Centre under Section 26(d) of the Freedom of Information and Protection of Privacy Act and will be used to process and manage your Volunteer Application. Should you have any questions about the collection of this personal information please contact the Cranbrook History Centre: 250-489-3918 or office@cranbrookhistorycentre.com.

Name: (printed): _____

Signature: _____ Date: _____

Legal Guardian Consent (Required for volunteers under 19)

Guardian Name: _____ Telephone: _____

Guardian Signature: _____ Date: _____

Thank you for your interest in volunteering at the Cranbrook History Centre. Please email your completed form to: office@cranbrookhistorycentre.com, or drop it off in person at: Cranbrook History Centre, 57 Van Horne Street S., PO Box 400, Cranbrook BC, V1C 4H9.

For Office Use Only

Interview Date: _____

Reference Check: _____

Read and Signed Volunteer Policy: _____

Criminal Record Check Complete: _____

Orientation: _____

Placement: _____