

Volunteer Application

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			Porsonal li	nformation				
			reisonai ii	illorillation				
Full Name:								
	Last			F	irst			
Address:								
	Street Ac	ldress					Apartment/Unit #	
	City					ovince	Postal Code	
Home Phone:	Alternate Phone:							
Email:								
Linaii.								
Birth Date:	(must be 13 years of age to volunteer)							
Emergency Cor	ntact Inform	mation						
Liner gency con	itact illion	nation						
Full Name:								
	Last First							
Home Phone:	Alternative Phone:							
5 1 % 1 %								
Relationship:								
			Availa	ability				
Please indicate th	e day and t	time when you	are available					
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturda	y Sunday	
Morning			,					
Afternoon Evening								
Date you are avai	lahla to hac	rin voluntaarin	a.					
Date you are avai	iable to be(jiii voidiiteeiiit	y					
			Volunteer I	nformation	l			
Interests: please	check the a					description	ns)	
□ Tours					_			
☐ Maintena☐ Paleonto					Archives Collections Car	· <u>a</u>		
□ Events	лоду				Administration	G		
Employment Expe	erience:							
Volunteer Experie	ence:							
M/less and seems in t		li inda anti 20	Ale a Oua - l I	Liliatam, O	.0			
vvny are you inter	estea in vo	iunteering with	tne Cranbrook	History Centre) /			

Summarize any other special skills and	qualifications you believe we should know about:				
Disease was ride the name and telephone	References				
Please provide the name and telephone	number of two-character references.				
Name:	Telephone:				
Name:	Telephone:				
Are you prepared to have a criminal rec	Criminal Records Check cord check conducted if your position requires you to be alone with				
children/youth/seniors or handle sensiti	ve information? (Individuals under 19 must have the criminal record check				
request form signed by a legal guardiar Yes	n). □ No				
	Agreement and Signature uthorize the Cranbrook History Centre to collect personal information				
verify the character references I have s Section 26(d) of the Freedom of Information Volunteer Application. Should you	for concerning my academic background and employment history, and to upplied. This information is collected by the Cranbrook History Centre under ation and Protection of Privacy Act and will be used to process and manage have any questions about the collection of this personal information please 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:				
	eering at the Cranbrook History Centre. Please email your completed https://example.com , or drop it off in person at:, Cranbrook History Centre, 57 Van ook BC, V1C 4H9.				
For Office Use Only					
Interview Date:					
Reference Check:					
Read and Signed Volunteer Policy:					
Criminal Record Check Complete:					
Orientation:					
Placement:					