



Food Bank Society
of Whitehorse

Banque alimentaire
Mätk'äts' ä däile yu

Volunteer Application Form

Some volunteer positions will require a Criminal Record Check.

First Name: _____ Last Name: _____

Address: _____ City: _____

Postal Code: _____

Tel. Home: _____ Work: _____ Cell: _____

Email: _____

Birth Date: Month _____ Day: _____ Year _____

Why do you want to volunteer at the Food Bank?

What kind of volunteer work would you like to do? What are your long term goals?

- | | |
|---|--|
| <input type="checkbox"/> Warehouse helper
(sorting and shelving) | <input type="checkbox"/> Office work |
| <input type="checkbox"/> Food distribution (give hampers to clients) | <input type="checkbox"/> Clients intake assistant |
| <input type="checkbox"/> Food packaging (stuffing hampers) | <input type="checkbox"/> Renovation of building |
| <input type="checkbox"/> Food drive organization | <input type="checkbox"/> Community Development |
| <input type="checkbox"/> Driver (will need to bring Driver's Abstract) | <input type="checkbox"/> Advocacy work |
| | <input type="checkbox"/> Fundraising / Events |
| | <input type="checkbox"/> Newsletter Contribution |

What skills, abilities or strengths do you have that relate to your volunteer interests at the FBW?

Please describe your past or present work or volunteer experience. List where, what you did and for how long.

How long are you willing to commit to a volunteer position and how many shift a week or a month?

What language(s) do you speak? FRENCH ENGLISH

OTHER _____

What language(s) do you write? FRENCH ENGLISH

OTHER _____

Please circle the days and times you are available to volunteer.

Mon	Tues	Wed	Thurs	Fri	Weekend
AM	AM	AM	AM	AM	AM
PM	PM	PM	PM	PM	PM

Signature _____ Date _____