



Volunteer Application Form

Thank you for your interest in volunteering for YouthSpeak! Your skills and knowledge are key to our success. Help us impact the lives of youth by sharing your special skills with our team. Volunteers have the opportunity to build the leadership skills of our youth, become members of our Board of Directors, assist in development of our social media activities, help plan fundraising events, as well as performing administrative tasks. To learn more about other ways to support the Charity, please visit www.youthspeak.ca/team

Please help us to determine how to make the best use your skills as a volunteer and understand your interests, please complete the form below and attached a current resume.

1. General Information

Name: _____

Address: _____

Phone number: _____

Email: _____

What is your preferred method of communication?

Phone Email

How did you find out about YouthSpeak?

Online Friend/family Workplace Media (e.g. TV, newspaper) Event
 Other (please describe):

What best describes your current situation?

Employed Retired Student Seeking work
 Other (please describe):

Please describe some of your reasons for wanting to volunteer with YouthSpeak:

Please indicate your level of skill or experience in the following areas (please check all applicable):

	None	Basic	Intermediate	Advanced
Mental Health Sector				
Business Management				
Social Media				
Education				
Fundraising				
Marketing				

Other Skills:

Do you have work or volunteer experience with other Charities? If yes, please describe

Is there anything else that you would like to tell us about your skills, experience or interests?

2. Availability

Start Date (mm/dd/yyyy): _____

End Date (mm/dd/yyyy): _____

Hours per week: _____

Please indicate the times during which you are available:

	Monday	Tuesday	Wednesday	Thursday	Friday
AM					
PM					

3. References

Please provide two references. These should be an employer/supervisor or an individual known through community involvement that you have known for at least six months. Personal friends or family members will not be accepted as references.

Name: _____

Title: _____

Relationship: _____

Email: _____

Phone Number: _____

Name: _____

Title: _____

Relationship: _____

Email: _____

Phone Number: _____

4. Consent and Submission

I hereby authorize Youthspeak Performance Charity Organization to obtain references from the above individuals in connection with my application for a volunteer position.

I hereby authorize the above-named individuals to provide a reference in connection with my application for a volunteer position with Youthspeak Performance Charity Organization, and release them from liability in regard to it.

I hereby certify that all information included in this application is true and complete.

Signature: _____ Date: _____

Vulnerable Sector Screening: Please note depending on volunteer position, volunteers may be required to produce a copy of their Police Vulnerable Sector Check (PVSC), which will be kept confidential by YouthSpeak.

Please submit the completed application along with an up-to-date resume to:

volunteers@youthspeak.ca

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