

Task Title: Completing A Volunteer Application Form

# OALCF Cover Sheet – Practitioner Copy

**Learner Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Started: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |
| --- | --- | --- |
| **Goal Path:** | Employment | Apprenticeship |
| Secondary School | Post Secondary | Independence |

**Successful Completion:**  Yes No

**Task Description:** The learner will complete a Volunteer Application Form for a local community agency.

**Main Competency/Task Group/Level Indicator:**

* Find and Use Information/Interpret documents/A2.2
* Communicate Ideas and Information/Complete and create documents/B3.1a

**Materials Required:**

* Pen/pencil and paper and/or digital device

# Learner Information

When someone is interested in volunteering, they are often asked to complete an application form.

Scan the “Volunteer Application”.

**Volunteer Application**

|  |  |  |
| --- | --- | --- |
| **Name:** | **Phone Number:** | |
| **Address:** | **Email:** | |
| **Emergency Contact Name:** | **Emergency Contact Phone Number:** | |
| **Most Recent Employer:** | **Position:** | **Length Employment:** |
| **Volunteer Experience:**  1.  2.  3. | **Position/Title:**  1.  2.  3. | **Length of Role:**  1.  2.  3. |
| **Personal Information:**  Please list any skills, hobbies or interests that may benefit your work with us:  1.  2.  3. | | |
| **Vehicle Information:**  Do you wish to use your vehicle for volunteering purposes? Yes No | | |
| **References:**  Please provide three references (e.g. a supervisor at a previous agency where you volunteered, an employer, a coworker. Please do not use relatives).  1. Name: Relationship:  Phone Number: Email:  2. Name: Relationship:  Phone Number: Email:  3. Name: Relationship:  Phone Number: Email: | | |
| **Authorization**  Authorization for Collection of Personal Information:  I have completed this application with the understanding that the “AGENCY” will collect, retain, disclose, use and dispose of my personal information in accordance with its obligations under applicable legislation, including the *Freedom of Information and Protection of Privacy Act* and the *Municipal Freedom of Information and Protection of Privacy Act*.  I understand that the “AGENCY” will rely on this personal information to conduct reference checks of my employment and/or volunteer experience; to verify any character references I have supplied; and to manage my ongoing employment or volunteer relationship with the “AGENCY”.  I certify that the information I have provided is true to the best of my knowledge as of today’s date. I undertake to keep the “AGENCY” informed if any of this information changes at any time. I also understand that willfully providing false information may result in the termination, for cause, of my employment or volunteer relationship with the “AGENCY”.  **Signature: Date:**  (Parent/Guardian signature required for children under 18 years old)  **Volunteer Statement of Confidentiality**  I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, agree to hold as confidential and will not disclose or release to any person or agency at any time, except where required by law, any information or document that tends to identify anyone receiving services from the “AGENCY” without written consent of the individual or their guardian prior to the release or disclosure of information or documents. I understand the breach of client confidentiality may result in my being removed from my volunteer position.  **Signature: Date:**  (Parent/Guardian signature required for children under 18 years old)  **Photo Video Consent**  I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, authorize the “AGENCY” to use my picture and quotes during volunteering for the publishing of marketing products such as: the website, bulletins, flyers etc. I acknowledge that the “AGENCY” cannot be held responsible for the outcomes of the pictures.  **Signature: Date:**  (Parent/Guardian signature required for children under 18 years old)  **Interviewing Staff Signature: Date completed:** | | |

# Work Sheet

**Task 1: Complete the first section of the Volunteer Application form including**

* **Name, phone number, address, email**
* **Emergency contact name and phone number**
* **Most recent employer, position, length of employment**
* **Volunteer experience, position, length of role**

Answer: No written response required here.

Task completed: Yes:

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**Task 2: Read the instructions under “Personal Information”. Complete this section by listing three skills or resources you would bring to a volunteer role.**

Answer: No written response required here.

Task completed: Yes:

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**Task 3: How many references do you need to provide?**

Answer:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Task 4: List two examples of a reference that would not be acceptable.**

Answer:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Task 5: What will happen if you provide false information to the agency?**

Answer:

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

# Answers

**Task 1: Complete the first section of the Volunteer Application form including**

* **Name, phone number, address, email**
* **Emergency contact name and phone number**
* **Most recent employer, position, length of employment**
* **Volunteer experience, position, length of role**

Answers will vary.

**Task 2: Read the instructions under “Personal Information”. Complete this section by listing three skills or resources you would bring to a volunteer role.**

Answers will vary.

**Task 3: How many references do you need to provide?**

Answer: Three

**Task 4: List two examples of a reference that would not be acceptable.**

Answer: Any relative – parent, sibling, child, aunt/uncle, etc.

**Task 5: What will happen if you provide false information to the agency?**

Answer: Willfully providing false information may result in the termination, for cause, of my employment or volunteer relationship with the “AGENCY”.

# Performance Descriptors

| Levels | Performance Descriptors | Needs Work | Completes task with support from practitioner | Completes task independently |
| --- | --- | --- | --- | --- |
| A2.2 | performs limited searches using one or two search criteria |  |  |  |
|  | extracts information from tables and forms |  |  |  |
|  | uses layout to locate information |  |  |  |
|  | makes connections between parts of documents |  |  |  |
| B3.1a | makes a direct match between what is requested and what is entered |  |  |  |
|  | makes entries using familiar vocabulary |  |  |  |

This task: Was successfully completed Needs to be tried again

Learner Comments:

Instructor (print): Learner (print):

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**