

Volunteer Application

Personal Information

First and Last Name: _____

Address: _____

City: _____ Postal Code: _____

Telephone (preferred): _____

Alternate tel. number (work, cell etc.) _____

Email: _____

Date of birth (MM/DD/YYYY): _____

Employment Status: _____

Describe your present or previous occupation: _____

Are you currently in school? If so, where? _____

Languages spoken and/or written: _____

Please note that following our policy, any former Domestic Abuse Services Oxford service user who wishes to become a volunteer cannot have received services from DASO for at least 24 consecutive months at the time of application.

Are you a former client of Domestic Abuse Services Oxford (from any of our programs including Shelter, Counselling, and/or children's programs)?

Please circle one: Yes No

If yes, please give the approximate date of your last contact with DASO/Women's Emergency Centre – Oxford: _____

How did you hear about Domestic Abuse Services Oxford?

Why do you want to be a volunteer at Domestic Abuse Services Oxford?

Please list any previous volunteer experience:

Availability

When are you available to start volunteering? _____

Please indicate your desired length of volunteer period (e.g. 6 months, 1 year, etc.):

How many hours per week do you want to volunteer? _____

Please indicate your preferred days/hours that you would like to volunteer. Feel free to add any other information that you think is relevant:

References

Please provide the complete name, title, phone number and email address for two references below.

All information received from your references is completely confidential and will not be shared with anyone, including you.

1. Name: _____

Title _____

Organization (if applicable): _____

Telephone: _____ Email: _____

2. Name: _____

Title _____

Organization (if applicable): _____

Telephone: _____ Email: _____

If you are under the age of 18, please have a parent/guardian fill out the following section:

My daughter/son, _____, has my permission to volunteer with the Domestic Abuse Services Oxford volunteer program.

Parent/Guardian signature:

Name (print): _____

Date: _____

Emergency Contact #: _____

Volunteer Opportunities

Please be aware that since the volunteer program at Domestic Abuse Services Oxford may not be able to accept all who express a desire to volunteer.

If you are recognized as a potential volunteer candidate, you will be invited to an interview or orientation session prior to becoming a member of our volunteer team. Please also note that if you are invited to be a volunteer you will need to obtain a Criminal Police Record Check and Vulnerable Sector Screening from your local police service.

The following are some of the positions available to volunteers at this time. Please check those that interest you (you may check more than one):

- Special events/fundraising (organizing/assisting with fundraising activities; soliciting prizes and sponsorships; telephone inquiries; distributing promotional material, set-up/cleanup, registration/other tasks during events)
- Property Maintenance (garden/flowerbed preparation; planting, weeding, exterior window cleaning)
- Administration Support (Writing thank you cards, supporting mail-out campaigns)
- Interaction with clients (plan/lead craft activities; exercise/stretching sessions; tutoring, reading/language assistance; teach a skill; offer a service)
- Donations Facilitator (sorting and shelving donations, checking expirations dates)
- Student Volunteer (secondary school): to fulfill the 40 hours of community service mandated by the provincial government
- Not sure, wherever I'm needed

Other – please specify _____

Please return the completed application form to:

Domestic Abuse Services Oxford

Attn: Samantha White, Communications Manager

975 James Street,

Woodstock, ON N4S 0A5

OR

Email – samantha@daso.ca

Thank you for your application!