



United Way
Perth-Huron

Volunteer Application Form



Thank you for your interest in volunteering with the United Way Perth-Huron!
Please complete this form to help us match your skills and interests with a suitable
volunteer position.

Once completed, please send your application via:

Email: info@perthhuron.unitedway.ca.

Mail: United Way Perth-Huron, 32 Erie Street, Stratford, ON, N5A 2M4

This application and related information will remain confidential.

1. Contact Information

Last Name		
First Name(s)		
Address (PO Box, #, street, city, postal code)		
Phone Number(s)	Home:	
	Work:	
	Cell:	
Email(s)	Personal:	
	Work:	
Preferred email for communications	<input type="checkbox"/> Personal <input type="checkbox"/> Work	
Gender Identification		
Languages Spoken		
Date of Birth (YYYY/MM/DD)		
Place of Employment		
Occupation/Title		

2. Emergency Contact Information		
Name (first and last)		
Relationship to applicant		
Address (PO Box, #, street, city, postal code)		
Phone Number(s)	Home:	
	Work:	
	Cell:	
3. Volunteer Information		
Why are you interested in volunteering with the United Way of Perth-Huron?		
Do you have any past volunteer experience? If yes, please list and briefly explain.		
What skills and abilities do you possess that would benefit the United Way of Perth-Huron?		
What are some of your interests?		
4. Volunteer work that you would be interested in (Please check all that apply.)		
<input type="checkbox"/> Office Support <input type="checkbox"/> Reception Coverage <input type="checkbox"/> Special Events <input type="checkbox"/> Fundraising <input type="checkbox"/> Community Impact & Allocations Committee <input type="checkbox"/> Building Community Awareness <input type="checkbox"/> Campaign Team <input type="checkbox"/> Property Advisory Committee <input type="checkbox"/> Board of Directors <input type="checkbox"/> Social Research & Planning Council <input type="checkbox"/> Other (please explain): _____		

5. Availability			
<input type="checkbox"/> Mornings <input type="checkbox"/> Afternoons <input type="checkbox"/> Evenings	<input type="checkbox"/> Monday <input type="checkbox"/> Tuesday <input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday	<input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday	
6. How did you learn about United Way Perth-Huron's volunteer opportunities?			
<input type="checkbox"/> Advertisement <input type="checkbox"/> iVolunteer Perth Huron <input type="checkbox"/> United Way Supported Partner <input type="checkbox"/> United Way Website/Social Media (Facebook, Twitter) <input type="checkbox"/> Personal Referral <input type="checkbox"/> Other (please explain): _____			
7. References			
A	Name (first and last)		
	Relationship to applicant		
	Phone Number(s)	Home:	
		Work:	
Cell:			
B	Name (first and last)		
	Relationship to applicant		
	Phone Number(s)	Home:	
		Work:	
Cell:			
8. Other Information			
Have you ever been convicted of a criminal offense for which you have not received a full pardon?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
UWPH has a monthly e-newsletter that includes information about our current work. Do you consent to being added to the e-newsletter list?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Signature			
Signature of Applicant			
Signature of Guardian (if under 18 years of age)			
Date			

