



Child Care Volunteer Application

Name:	
Address:	Postal Code:
Email:	Phone number:
Emergency contact:	Phone number:

Age Category: 18 and older 16-17 years old 12-15 years old

What volunteer positions are you interested in?

- Child Care Assistant
- Office Assistant
- Program Facilitator
- Agency Delivery & Errand Driver
- Repair and Maintenance
- Is there something you'd like to do for us? _____

How did you hear about the volunteer opportunities at Thrive Child Care?

Previous Related Experience

Relevant Skills/Training/Education

Languages Spoken: _____

Speak Write Read

When are you available to volunteer? (Please check the days and times you are available.)

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning						
Afternoon						

How often are you able to volunteer? Once a week Twice a week
 Twice a month Other: _____

Do you have any health, safety, or legal concerns that you wish to be taken into consideration before your volunteer placement?

Have you read, and do you think you could work within our philosophy?

Will you need forms signed for any kind of program (School, EIA, Fine Options, etc.)?

How many shifts or hours does your program require:

What is the deadline for completion (if applicable)?

As a matter of procedure, we screen all prospective volunteers; you may have to provide us with Criminal Record Check and Child Abuse Registry Check, are you willing to obtain these?

Are there any convictions or charges you wish to disclose before moving forward?

(The existence of a criminal record will not necessarily prevent a person from volunteering. A decision will be made based on the offense and their relevance to the position.)

Please list at least 2 references (references can be professional or personal, but should not be family members), and provide their phone numbers.

1. Name: _____ Phone: _____

2. Name: _____ Phone: _____

3. Name: _____ Phone: _____

I hereby grant permission for Thrive Community Support Circle Inc. to contact any or all the above references. I understand that references are confidential and waive the right to see them.

Signature: _____ Date: _____

