



Volunteer Application Form

Name: _____

Address: _____

Telephone: _____ (*home*) _____ (*work*)

_____ (*other*)

Type of Volunteer Work Required: _____ special events _____ clerical

Work Experience:

1) Present/Last Job Title:

Organization Name: _____

Period of Employment:

From: _____ To: _____

Name of Supervisor: _____

Telephone: _____

Address: _____

Volunteer Experience:

1) Most Recent Position: _____

Organization Name: _____

Period of Volunteer Service:

From: _____ To: _____

Name of Supervisor: _____

Telephone: _____

Address: _____

Other Volunteer Experience: *(please provide details)*

Other Relevant Qualifications:

Times Available:

References: *(please provide three – preferably one professional, volunteer and character):*

1) Name: _____

Telephone: _____

Relationship with Reference: _____

2) Name: _____

Telephone: _____

Relationship with Reference: _____

3) Name: _____

Telephone: _____

Relationship with Reference: _____

I hereby declare that the information provided on this application form is true and complete to my knowledge and I understand that a false statement may disqualify me from being considered for any volunteer position with the School Lunch Association.

I authorize the School Lunch Association to contact my references and any other background checks relative to the requirements and duties of the volunteer position.

Applicant's Signature

Date

40 Newtown Road (Macpherson School) St. John's, NL A1C 4E1
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