

VOLUNTEER APPLICATION

**The Society for Support to Pregnant
& Parenting Teens**



9625 Prairie Road
Grande Prairie, Alberta
T8V 6G5
(780)538-3854

PERSONAL INFORMATION

NAME	
MAILING ADDRESS	
CITY, PROVINCE	
POSTAL CODE	
HOME PHONE NO.	
CELL PHONE NO.	
E-MAIL ADDRESS	
DATE OF BIRTH (D/M/Y)	

INTERESTS

Please indicate which of the following area(s) you are interested in volunteering.

- | | |
|--|--|
| <input type="checkbox"/> First Steps Childcare Nursery | <input type="checkbox"/> Raffle Ticket Sales |
| <input type="checkbox"/> Donation Room Support | <input type="checkbox"/> Fundraising Events' Worker |
| <input type="checkbox"/> Administrative Support | <input type="checkbox"/> Casino Worker |
| <input type="checkbox"/> Client Program Support | <input type="checkbox"/> Member of the Fundraising Committee |
| <input type="checkbox"/> Client Activities Support | <input type="checkbox"/> Member of the Board of Directors |
| <input type="checkbox"/> Other: _____ | |

EDUCATION AND TRAINING

Please indicate the types of education and training acquired to date.

<input type="checkbox"/> University	Name, City:
	Focus, Dates:
<input type="checkbox"/> College	Name, City:
	Focus, Dates:
<input type="checkbox"/> High School	Name, City:
	Focus, Dates:
<input type="checkbox"/> Other	Name, City:
	Focus, Dates:

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WORK/VOLUNTEER EXPERIENCE

Please list your work experience, beginning with your most recent position.

EMPLOYER

CITY, PROVINCE

POSITION HELD

DATES OF EMPLOYMENT

EMPLOYER

CITY, PROVINCE

POSITION HELD

DATES OF EMPLOYMENT

EMPLOYER

CITY, PROVINCE

POSITION HELD

DATES OF EMPLOYMENT

SPECIAL SKILLS

Briefly describe or list skills and abilities you have that you feel may be a benefit and may contribute towards the betterment and success of the Society.

REFERENCES

Please list two references (not relatives) that we may contact.

NAME, CITY

PHONE NO.

NAME, CITY

PHONE NO.

All the information I have provided in this application is true and I authorize the Volunteer Coordinator of The Society for Support to Pregnant & Parenting Teens to contact and request information from the references I have named.

Signature

Date

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HOW TO BECOME A VOLUNTEER

