



Volunteer Application

All information will remain confidential. Please do not provide us with information that you feel infringes on your privacy or individual rights. Applicants may be required to provide the Community Kitchen Program with confirmation of security clearance from the Calgary Police Service.

Personal Information:

Name: _____

Address: _____ Postal Code: _____

Phone: (Home) _____ (Business) _____ (Cell) _____

E-mail: _____ Age: _____

Emergency Contact (name): _____ Phone: _____

Relationship: _____

Are you currently taking any medications? Yes No

If yes, please list them: _____

Do you have any health concerns, medical conditions, or allergies that we should be aware of for your own health and safety while a volunteer with the Community Kitchen Program?

Circle either: Yes or No

If yes, please list: _____

Please check any of the following areas of potential volunteer work that interest you:

___ Sorting Donations ___ Bagging/Boxing Produce ___ Bag Counting for Good Food Box

___ Driving Trucks ___ Loading/Unloading trucks ___ Fundraising

Please check any of the following reasons for volunteering:

___ Work Experience ___ Group/Corporate Initiative ___ School Requirement

___ Meet New People ___ Contribute to Community ___ Community Service Requirement

___ Gain New Skills ___ Other: _____ (please explain)

Please tell us what days/times you are available to volunteer with Community Kitchen Program of Calgary:

Days: (excluding Friday) _____ Time: _____ AM _____ PM

Please provide us with a non-family references whom we may contact:

Name: _____ Phone: _____

Relationship: _____ How Long: _____

I agree to have the above references contacted. Please note that the above information will be held in your personal file and on the job site in case of an emergency.

CLICK TO SUBMIT