



## Volunteer Application Form

**Our Mission:** Surrey Women's Centre is a non-profit, feminist organization whose mission is to support and enhance the lives of women, children and families impacted by violence. We help women, children and families heal from the trauma of violence in a safe and supportive environment. Our counselling and support services provide the essential tools that survivors need to rebuild their lives.

### Contact Information

Name	
Street Address	
City	
Postal Code	
Home Phone	
Cell Phone	
Work Phone	
E-Mail Address	

### Availability

<input type="checkbox"/> Weekday mornings	<input type="checkbox"/> Weekday afternoons	<input type="checkbox"/> Weekday evenings
<input type="checkbox"/> Weekend mornings	<input type="checkbox"/> Weekend afternoons	<input type="checkbox"/> Weekend evenings

### Which volunteer position are you interested in?

- Crisis Line Volunteer (provide support, information and referrals to women survivors of violence over the phone and in person)
- Office Volunteer (welcoming visitors, answering business line, responding to general inquiries, mailings)

### Interests

What are your reasons for volunteering at Surrey Women's Centre?

### Outcomes

What do you hope to achieve from your volunteer work at Surrey Women's Centre?

### Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports that would be relevant to this position.

## Previous Experience

Please describe any experience that you have related to violence against women or children.

## Computer Skills

Word	<input type="checkbox"/> None	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Excel	<input type="checkbox"/> None	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Outlook	<input type="checkbox"/> None	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Access	<input type="checkbox"/> None	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
PowerPoint	<input type="checkbox"/> None	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Internet	<input type="checkbox"/> None	<input type="checkbox"/> Basic	<input type="checkbox"/> Intermediate	<input type="checkbox"/> Advanced
Other	Please describe:			

## Languages

Do you speak a second language?  Yes  No

If yes, what language do you speak and how fluent are you?

## Agreement and Signature

By submitting this application, I affirm that I am over the age of 19, support Surrey Women's Centre's Statement of Principles (see brochure or website) and will consent to have a criminal record check completed. The facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

## Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.