



**County of Renfrew Long-Term Care
Volunteer Application Form**

Identification #: _____

Applying for either: Bonnechere Manor Miramichi Lodge

NAME: _____ DATE: _____
(last) (first)

ADDRESS: _____
(street) (city) (postal code)

PHONE: () _____ - _____ NAME OF SCHOOL: _____
(if presently attending)

EMAIL ADDRESS _____ HOURS WEEK: _____

AGE: 15-25 26-34 35-54 55-69 Other

LANGUAGES SPOKEN: _____
(other than English)

EMERGENCY CONTACT:

NAME: _____ HOME PHONE #:() _____ - _____

RELATION: _____ BUSINESS #:() _____ - _____

-
- REQUIREMENT
- CRIMINAL/CHECK
 - PARDONED SEXUAL OFFENDER DATABASE
 - 2 STEP Tuberculosis test

PREVIOUS OR PRESENT VOLUNTEER PLACEMENTS:

SPECIAL INTERESTS/HOBBIES:

TRAINING/COURSES:

ADDITIONAL INFORMATION:

The **Auxiliary Group** is a voluntary group of persons who are interested in the well-being of the Residents within the Home. This group meets monthly to review accomplished and future volunteer tasks undertaken by the Auxiliary on both a regular and occasional basis on behalf on the Home.

Would you be interested in joining the Auxiliary? YES NO

AVAILABILITY: Short Term Long Term

DAYS	MORNING (8:00am to 12:00pm)	AFTERNOON (12:00pm to 5:00pm)	EVENING (6:00pm to 9:00pm)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

TWO REFERENCES (one professional, one personal)

NAME: _____

NAME: _____

ADDRESS: _____

ADDRESS: _____

PHONE #: () _____ - _____

PHONE #: () _____ - _____

In making this application I hereby give the Bonnechere Manor authority to contact the persons named as references and to make inquiries with the strictest of confidence with the Police Authorities as may be deemed necessary to ascertain my suitability as a volunteer.

SIGNATURE: _____

DATE: _____

ADDITIONAL INFORMATION: _____
(for interviewer use)

INTERVIEWER: _____

DATE: _____