

Mennonite Central Committee British Columbia Volunteer Application Form

- This application is used for volunteer positions and is not interchangeable with an employment application.
- Return this form to the MCC BC office at 33933 Gladys Avenue, Abbotsford, BC, V2S 2E8, fax 604-850-8734 or email VolAdmin@mccbc.ca
- Please **TYPE** or **PRINT LEGIBLY**.

MCC Mission Statement

Mennonite Central Committee, a worldwide ministry of Anabaptist churches, shares God's love and compassion for all in the name of Christ by responding to basic human needs and working for peace and justice. MCC envisions communities worldwide in right relationship with God, one another and creation.

Application Date ____/____/____
Mo/Day/Year

Contact Information

Full Name (first, middle, last) _____

Address _____

City _____ Province/Territory _____ Postal Code _____

Date of Birth: ____/____/____ If under 19, please provide your age: ____
Mo/Day If interested in *CoSA, please provide year of birth: _____ Male / Female

Provide the following contact information and check the preferred Method of Contact:

Phone Day _____ Cell Phone _____

Phone Evening _____ Email _____

In Case of Emergency

1st Contact _____ Phone _____ Relationship _____

2nd Contact _____ Phone _____ Relationship _____

Volunteer Opportunities with MCC BC

What type of volunteer role would most appeal to you? _____

Which community/location would you prefer to serve in? _____

Please indicate which AREA you are most interested in volunteering at MCC BC:

- | | |
|---|--|
| <input type="checkbox"/> Material Aid / Warehouse | <input type="checkbox"/> Festival (in Abbotsford and/or Prince George) |
| <input type="checkbox"/> Office Administrative Assistance | <input type="checkbox"/> Visitor Exchange Host Family |
| <input type="checkbox"/> Programs assisting People in Need (Aboriginal, Abuse Prevention, Employment, Refugee, *CoSA) | <input type="checkbox"/> Quilting |
| <input type="checkbox"/> Thrift Shops | <input type="checkbox"/> Common Place Café |
| Which shop? _____ | <input type="checkbox"/> Ten Thousand Villages |
| | <input type="checkbox"/> Special Events |

Why do you want to volunteer with MCC BC and what would make volunteering worthwhile? _____

Have you volunteered with MCC or other organizations in the past? _____ (If yes, please indicate where, when & what you did?)

Are you willing to attend a volunteer training session? Yes No

As a volunteer, I understand my name, address & phone number will be on the MCC BC mailing list so I can receive MCC BC newsletters and volunteer training information. Please Initial _____

Experience/Skills Please list relevant work or volunteer experience, including organization/company. (You may attach a resume if desired)

Specific Skills - check skills you bring.

- Sales/Customer Service Cash-handling Server/Food Prep Able to lift & carry heavy items
 Quilting Sewing

List languages spoken, written or read (indicate limited, fairly well or fluent knowledge): _____

Volunteer Availability

To get a general idea of your availability, please check the approximate length of Volunteer Commitment:

- Occasional/As Needed Short-term _____ Ongoing Not Sure

How frequently will you be available? Hours per week ____ Hours per month ____ Days per week _____

What is your time preference? daytime evening weekends

Have you completed the Reference Form, Appendix B? Yes No

References (do not list relatives)

Name: _____ Relationship _____

Telephone (home & cell) _____ Email _____

Name: _____ Relationship _____

Telephone (home & cell) _____ Email _____

Miscellaneous Information

Are you legally eligible to work in Canada? Yes No

Have you ever been convicted of a criminal charge in Canada or equivalent violation in another country?

- Yes No

If yes, please explain _____



Vancouver Fraser Valley Circles of Support and Accountability volunteers

By signing this application you understand and agree to get a CPIC record check.

Mennonite Central Committee is committed to protecting the privacy of personal information in our possession or under our control in accordance with the Personal Information Protection Act. The personal information collected on this form will be used by MCC BC to screen applicants and identify an appropriate volunteer placement, as well as for emergency contact information. You are required to keep the confidentiality of all persons and information you access or with whom you work.

By signing and submitting this volunteer application, I acknowledge I have read it completely and that the information I am providing is true and accurate. I am able and willing to support MCC Mission and Values.

Signature _____ Date _____