

Girls Incorporated  
of Durham

1 – 398 Bayly Street W.  
Ajax, ON  
L1S 1P1  
Tel: 905 428-8111  
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Email: [info@durham.girls-inc.org](mailto:info@durham.girls-inc.org)  
Website: [www.girlsinc-durham.org](http://www.girlsinc-durham.org)



Inspiring all girls  
to be strong,  
smart, and bold<sup>SM</sup>

### **Volunteer Application Form**

Thank you for your interest in Girls Incorporated of Durham. We appreciate you taking the time to complete the following application form. Girls Incorporated recognizes that each volunteer brings unique skills and experience to our agency. The information you provide will help identify these abilities and ensure that your volunteer experience with Girls Incorporated of Durham will be both enjoyable and rewarding.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal Code \_\_\_\_\_

Phone: Home ( ) \_\_\_\_\_ Business ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Best time to contact: Day \_\_\_\_\_ Evening \_\_\_\_\_ Work \_\_\_\_\_ At home \_\_\_\_\_

### **HOURS OF AVAILABILITY**

Dates and Times		Morning Before 12pm	Afternoon 12pm-6pm	Evening After 6pm	Specific Times (Optional)
	Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Saturday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Sunday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

### **Interests / Skills / Experience**

Do you have any previous volunteer experience? \_\_\_\_\_  
\_\_\_\_\_

What skills and/or experience would you like to contribute to the Girls Incorporated organization? (i.e. fundraising, public speaking, computer skills, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

What particular skills and/or experience would you like to gain from volunteering with Girls Incorporated? \_\_\_\_\_  
 \_\_\_\_\_

Of the volunteer opportunities available, why did you choose to become involved with Girls Incorporated? \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Why now? \_\_\_\_\_

**VOLUNTEER OPPORTUNITIES:**

Please choose from the following volunteer opportunities:

<b>Program Volunteer Opportunities</b>	
Girls Inc. Operation SMART®	
Girls Inc. Economic Literacy®	
Girls Inc. Leadership and Community Action®	
Girls Inc. Sporting Chance®	
Girls Inc. Project BOLD®	
Girls Inc. Media Literacy®	
Girls Inc. FRIENDLY PEERsuasion®	
Girls Inc. Preventing Adolescent Pregnancy®	
Program Driver	
Program Assistant	

<b>Committee Volunteer Opportunities</b>	
Board of Directors	
Communications Committee	
Finance Committee	
Fund Development Committee	
Nominating Committee	
Program Committee	

<b>Event Volunteer Opportunities</b>	
Community Information Booths	
Girls Day Out Fundraiser	
Golf Tournament Committee	
Maple Syrup Festival	
Office Volunteer	
Parades	
Pumpkinville	
Racing Against Drugs	
United Way Events	

List names of members of the association you may know. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**EMPLOYMENT:**

Occupation: \_\_\_\_\_  
 Employer: \_\_\_\_\_ Phone ( ) \_\_\_\_\_  
 Address: \_\_\_\_\_  
 \_\_\_\_\_ (postal code) \_\_\_\_\_  
 How long have you been with your present employer? \_\_\_\_\_

**EDUCATION:**

Highest level of education attained: \_\_\_\_\_

**Have you ever been convicted of a criminal offence for which you have not received a pardon?** \_\_\_\_\_

**If yes, please explain.** \_\_\_\_\_

How did you find out about Girls Incorporated of Durham?

Sign  Newspaper  Radio  Recreation Handbook   
Another Volunteer  Friend  Community Display/Information Booth   
Other \_\_\_\_\_

**REFERENCES:**

Please list names of three people we can contact for references (no relatives please). If you are employed, please include your employer or supervisor.

**Note: Referees are individuals who have known you more than 2 years**

1. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_
2. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_
3. Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

To facilitate my screening as a volunteer with Girls Incorporated of Durham, I hereby authorize the exchange of information between Girls Incorporated of Durham and the above listed referees.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date

**Please forward application to:**  
**Girls Incorporated of Durham, 1 - 398 Bayly Street West, Ajax, Ontario L1S 1P1**  
**Phone: (905) 428-8111 Fax: (905) 428-9992 Email: info@durham.girls-inc.org**  
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