

VOLUNTEER APPLICATION



Contact Information

Name: _____

Address: _____

City

Postal Code

Home Phone: _____ Cell Phone: _____

Email: _____ Date of Birth: _____
dd/mm/yyyy

Emergency Contact Name: _____ Relation: _____

Emergency Phone Number: _____

Areas of Interest (check all that apply)

- | | |
|---|---|
| <input type="checkbox"/> Fill Hampers | <input type="checkbox"/> Sorting |
| <input type="checkbox"/> Client Relations | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Pick Up Bread | <input type="checkbox"/> Committees |
| <input type="checkbox"/> Donation Pick Up | <input type="checkbox"/> Board Seat |
| <input type="checkbox"/> Warehouse | <input type="checkbox"/> Maintenance/Construction |
| <input type="checkbox"/> Repackaging | |

Availability

- Seasonal (Christmas)
 Regular
 Occasional

- Would you consider driving your own vehicle to perform occasional pick-ups? Yes No
- Are you physically able to lift 30-40lbs? Yes No
- Do you own a pick-up truck or large SUV? Yes No
- Are you currently certified in First Aid Training? Yes No
- Do you have any physical limitations/allergies etc. that need to be considered when scheduling you for tasks? Yes No

Internal Use Only

Date Received: _____ Date Contacted: _____

Orientation Date: _____ Date Started Volunteering: _____

Criminal Record Check Completed: _____ Availability: _____



Healthy Fresh & Non-Perishable Food Pick Up & Delivery
Toiletries and Pet Food • Shopping Days • Christmas Hampers
Strategic Partnerships • Corporate Team Building • Off-Campus Events • Volunteer Opportunities
780-998-4099 | 11226 – 88 Avenue, Fort Saskatchewan, AB T8L 3W5
FortSaskatchewanFoodBank.com

Volunteer Agreement and Oath of Confidentiality

As a volunteer of the Fort Saskatchewan Food Gatherers Society/Fort Saskatchewan Food Bank, I do hereby understand and agree to the following:

- Respect and uphold FSFGS Belief Statements and Mission and FBC Food Banking Ethics.
- Follow the direction of staff and volunteer leads, policies and procedures.
- Any information recorded, received, or acquired in any form in connection with my duties is considered confidential. Confidential information includes all records which in any way would divulge information related to our clients, members, volunteers, staff and other associate organizations.
- I understand that any unauthorized release or carelessness in the handling of confidential information is considered a breach of my duty to maintain confidentiality and will result in the termination of volunteer privileges.
- Speak and act in a manner that respects the privacy and dignity of the organization, clients, donors, staff and volunteers whether working within the facility or conducting Society business within the community.
- I will not make public statements to the media either explicit or implied, on behalf of the Society.
- Not to take donated products from the warehouse floor for personal consumption, other than special instances as approved/directed by the Executive Director.
- Adhere to Health and Safety protocols posted within the facility, and any updates that may be made in the future.
- I agree to stay home if sick, this includes but is not limited to:
 - Fever
 - Runny Nose
 - Shortness of Breath
 - Cough
 - Sore throat
- I am aware that I will receive general information emails regarding the Food Bank and volunteering. I am aware that scheduling is currently managed primarily via texting. It is my responsibility to notify the scheduler immediately via text if I am unable to attend my assigned shift for any reason.
- A basic criminal record check is required. The authorization form will be issued upon the submission of this form. A new basic criminal record check is required a minimum of every 5 years, or as required. The original document, with seal from the RCMP, is to be returned to the FSFGS.

Date: _____ Signature: _____



ComFort Food.