

**Volunteer Application Form**

Thank you for your interest in volunteering to help fight community hunger alongside the Sadaqa Food Bank. Volunteers are our most valuable and an integral part in the work we do. Without the hard work and dedication of volunteers, we would not exist to serve.

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

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

City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Language(s) you speak: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone #s (Cell):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Home):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Work):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Valid Driver’s License (Yes or No):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**In case of emergency, please contact:**

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

Phone # (Home):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Work):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Cell):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please check each of the following areas in which you are interested in assisting:**

□ **Food Sorting -** **(Operations Hub)** – (*Thursdays, Saturdays, Sundays)*

□ **Food Bundling & Handing Out** **(Distribution Hub)** – (*Saturdays, Sundays)*

□ **Food Delivery** (Driver Licence and vehicle required)

□ **Food Pick-up** (Driver Licence and vehicle required)

□ **Special Events** (Fundraising, School Campaigns, Outreach programs)

□ **Cleaning & Garbage Disposal**

□ **Others** e.g. Project Development, Grants & Sponsorships, Marketing etc.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please indicate when you are available:**

□**Thursday**: 9:30am to 1:00 pm

□ **Saturday**: 9:30am to 1:00pm

□**Sunday**: 9:30am to 1:00pm

**Special Consent:**

* I understand that in the course of volunteering for the Sadaqa Food Bank, I may be dealing with confidential information and I agree to keep such information in the strictest confidence.
* I understand that I am not authorized to copy, add or delete any data/record from the Sadaqa Food Bank database/systems and equipment (computers, phones, photocopier, fax, etc.).
* I recognize that I am not authorized to speak publicly on organizational matters on behalf of the Sadaqa Food Bank.
* I understand that in the course of my volunteer work, I could be photographed or videoed by media, or SFB staff. Please identify this to SFB should you wish not to be photographed or videoed.

**Signatures**

**Signed:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Guardian Signature if under 18**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Are there any medical concerns we should be aware of?**

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**Do you require documentation for your hours?**

□ If yes – please state reason\*:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

□ No, I do not require documentation.