



RENFREW AND AREA SENIORS' HOME SUPPORT INC.

People Helping people at Home and In Our Community

Box 919, 214 Raglan St. S., Renfrew, Ontario K7V 4H3
Telephone 613-432-7691 ~ Fax 613-432-7436 ~ www.renfrewhomesupport.ca

Thank-you for your interest in becoming a volunteer with Renfrew and Area Seniors' Home Support. Volunteers are an integral part of our service, helping to provide those services that allow seniors and adults with disabilities to age well at home, in their own communities, which is where they tell us they want to be.

Volunteering opportunities with our agency fall within one of three areas: governance, fundraising and service provision (transportation, friendly visiting, telephone assurance, frozen meal delivery and grocery delivery). We are open to other volunteering options and would love to hear your ideas.

Our volunteer process consists of four parts:

- Application
- Vulnerable Sector Search
- Interview
- Reference checks

Once we receive your application and vulnerable sector search, we will review it and then contact you to further discuss our opportunities with you. If it is mutually agreed that this is the place for you to volunteer, an interview will be scheduled followed by the reference.

Thank-you once again for your interest in volunteering with Renfrew and Area Seniors' Home Support - we look forward to receiving your application.

MISSION STATEMENT

"...to preserve the independence of seniors and adults with disabilities by enabling these individuals to remain as active as possible in their own homes and communities."



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APPLICATION FOR VOLUNTEER SERVICE/HOME MAINTENANCE WORK

Name: _____ Home Phone _____
Address _____ Cell Phone _____
_____ Email Address _____

Town/Township _____

Preferred form of communication: Home Phone () Cell Phone () Email ()

Emergency Contact: _____ Phone: _____

Relationship: _____

ABOUT YOU:

Why do you want to volunteer with us?

Volunteer Experience/Community Involvement

Skills/Hobbies/Interests/Activities willing to share:

Do you have any special needs to take into consideration when selecting a suitable volunteer position? (Lifting, allergies, medical conditions)

To be completed if applying for Volunteer Positions

Please indicate which activities are of interest to you:

Board of Directors ()	Telephone Assurance ()	Office ()
Fundraising ()	Friendly Visiting ()	Grocery Delivery ()
Local Transportation ()	Long Distance Transportation ()	Frozen Meals ()
Golden Age Activity Centre () Other: _____		

To be completed ONLY if applying for Volunteer Driving

Vehicle Make: _____ Model _____ Year _____

() 2 door () 4 door () van () air conditioning

Driver's license Number: _____ Class: _____

Restrictions: _____

Driving Experience (years): _____

Accidents/Moving violations in the past 3 years: () yes () no

To be completed if applying for Home Maintenance Work

Please indicate which services you are interested in providing:

() Lawn Cutting	() House Cleaning
() Painting	() Gardening/Weeding
() Raking Leaves	() Window Cleaning
() Carpentry/Repairs	() Laundry
() Snow Shoveling	() Other (please specify) _____

AVAILABILITY

Mornings () Afternoons () Evenings () Weekends ()
Monday () Tuesday () Wednesday () Thursday () Friday ()

EMPLOYMENT HISTORY (Last 5 years)

Employer	Location	Start	Finish

REFERENCES:

Please list three (3) references who are not related to you by blood or marriage and who can verify your past volunteer/work experience.

Name	Phone	Email address

Authorization for collection of personal information:

I authorize Renfrew and Area Seniors' Home Support Inc. to collect personal information appropriate to the position applied for concerning my employment history, volunteer experience, driving records (for volunteer drivers) and to verify the character references that I have supplied. I understand that the information obtained will be confidential. I hereby certify that the above information is true to the best of my knowledge. I agree to keep Renfrew and Area Seniors' Home Support Inc. informed if any of the above information changes at any time. I understand that any willful falsification of information may result in termination of my volunteer or home maintenance assignment.

Volunteer Statement of Confidentiality

I agree to hold as confidential and will not disclose or release to any person or agency at any time, except where required by law, any information or document that tends to identify anyone receiving services from Renfrew and Area Seniors' Home Support Inc. without the written consent of the individual or their guardian prior to the release of disclosure of information or documents. I understand that a breach of client confidentiality may result in my being removed from my volunteer/home maintenance position.

To ensure the safety of vulnerable clientele:

I understand that a Vulnerable Sector Search conducted by the Ontario Provincial Police is a requirement to volunteer with Renfrew and Area Seniors' Home Support Inc.. This includes a search of the pardoned sexual offender database and will be completed by the local O.P.P. detachment.

Liability Release:

In consideration of all Community Support Services provided by Renfrew and Area Seniors' Home Support Inc., I for myself, my heirs, executors, administrators, successors and assigns hereby release, waive and forever discharge Renfrew and Area Seniors' Home Support Inc., employees, board of directors and volunteers from all claims, demands, damages, costs in respect to injury, death, loss or damage to my person or property, however caused arising out of services provided by Renfrew and Area Seniors' Home Support Inc. and notwithstanding that the same may have been contributed to or occasioned by the negligence of any of the aforesaid.

Notice and Consent:

I acknowledge having read, understood and agree to the above statements within this document.

Applicants Signature

Staff Signature

Date

Date

We thank you for your interest in our Community Support Agency and for your application.

Our Mission Statement

To preserve the independence of seniors and adults with disabilities by enabling these individuals to remain as active as possible for as long as possible in their own homes and communities.

Please tell us how you heard about us:

() Family/friend () Staff () Volunteer () Client () Newspaper () Poster () Radio

() Social Media () Website () Other (specify): _____