VOLUNTEER APPLICATION



	Date:			ate:
A. Personal	<u>Information</u>			
Name:First Name		Middle Init	al Surname	
Date of Birth:		Se	x: Male □	Female □
Mor	nth Day Yea	ar		
Home Address: _				
	Number, Street, Apartmen	nt, Rural Route, P.0). Box	
	City	Prov	nce	Postal Code
Home Telephone:		C	ell Number:	
Email address:				
Mailing Address:				
If different than above)	Number, Street, Apartmen	nt, Rural Route, P.	O. Box	
	City	Prov	ince	Postal Code
	,			
B. Education	<u>1</u>			
Institution		[iploma/Degree	Date
		l		1
C. Reference	<u> </u>			
Please provide in	formation for 2 refe	erences		
Name Org		Organizati	on/Title	Phone Number
		<u> </u>		
		•	*We must be able to co	ontact the references you have liste

D. Availabil	<u>ity</u>		
□I am available □I am available □I am only avai			
E. Objectiv	es for this voluntee	r position	
If yes, name of i	eting? □	no 🗖 yes	
F. What, sp	ecifically, are you h	noping to observe, lea h AXIS Family Mediat	ırn, and/or experience
	e work		☐ observe mediation ☐ other (specify):
G. Preferre	d Locations (Check	all that apply)	
☐ Hamilton	☐ Kitchener	☐ Guelph	□Simcoe
□Cayuga	☐ Brantford	☐ St. Catharines	☐ Welland
Date		Signature	

Please attach a copy of your résumé to this application