



VOLUNTEER APPLICATION

PERSONAL INFORMATION

Name:	Home Address: _____ _____ _____
Preferred Phone number:	
Personal Email:	
Email (other):	

Are you legally entitled to work in Canada: Yes No

Volunteers who are not legally entitled to work in Canada may still be considered. For more information please contact 403-776-1063.

Please list any medical or physical conditions that we should be aware of for your safety or that may restrict your ability to perform certain tasks (ie. Asthma, heart problems, epilepsy, allergies, back or joint problems):

GETTING TO KNOW YOU

1. What position are you interested in? Please check all that apply.

- | | |
|--|---|
| <input type="checkbox"/> Gallery Guide Volunteer | <input type="checkbox"/> Marketing and Communications Volunteer |
| <input type="checkbox"/> Education Program Facilitator Volunteer | <input type="checkbox"/> Special Events Volunteer |
| <input type="checkbox"/> Youth Summer Program Leader | <input type="checkbox"/> Website Content Volunteer |
| <input type="checkbox"/> Collections Assistant Volunteer | |

2. Why are you interested in volunteering at Canada's Sports Hall of Fame?

3. Please provide a brief summary of current/past education, employment and volunteer positions. Remember to include details on any past experience relating to the position you are most interested in.

4. Do you speak and/or write any other languages than English? Please indicate your proficiency level.

Yes No Languages: _____

ACKNOWLEDGEMENT OF INFORMATION PROVIDED

I verify that the information I have provided is accurate and true.	<input type="checkbox"/> Yes
I understand that to ensure the safety of all visitors to Canada`s Sports Hall of Fame, I may be asked to undergo a police records check.	<input type="checkbox"/> Yes
I understand that Canada`s Sports Hall of Fame`s Volunteer Program has a screening process and I may not be offered a volunteer role.	<input type="checkbox"/> Yes
This information is collected in accordance with the Freedom of Information and Protection of Privacy Act, and I understand it will be used solely for the purposes of determining eligibility and suitability for Canada`s Sports Hall of Fame`s Volunteer Program.	<input type="checkbox"/> Yes

Signature of Applicant

Date

Signature of Legal Guardian

Date

If you are under 18 years of age, you must have your parent or legal guardian sign this form.

Please review your application form to ensure you have provided us with all the information requested. Please attach a current resume with your volunteer application.

Please submit your completed application in one of the following ways:

Email: volunteers@cshof.ca
Fax: 403-776-1045
Mail: Attn: Siobhan Kelly
Canada`s Sports Hall of Fame
169 Canada Olympic Road SW
Calgary, AB T3B 6B7