

445 Hoffer Drive
Regina, Saskatchewan
Canada S4N 6E2
ssc@sasksafety.org
306.757.3197
1.855.280.7115

Volunteer Application Form

Applicant Details

Application Date: _____

Name: _____ City of Residence: _____

Employer: _____

Email: _____

Phone: _____

Preferred Method of Contact?: Text Message Phone Email

Are you volunteering as part of a corporate volunteer program? Yes No

Please list volunteer experience: _____

Emergency Contact

Name: _____ Relationship: _____

Phone: _____

Availability

Weekday Evening Weekend Flexible

Students Only

Name of School: _____

Current level of Education: _____

Is this a requirement for a class? Yes No

If Yes, please check how many volunteer hours are required: 10 20 40 60+

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Education and Training

Highest grade attained: _____

Degrees, Certificates, diplomas: _____

Declaration

Are you a resident of the province of Saskatchewan? Yes No

Have you ever been convicted of a criminal offence for which you have not been pardoned?

Yes No

Do you have a disability/ medical condition which might affect your ability to perform certain volunteer functions? Yes No

Is there any reason you may not wish your image (photo or video) to be made public on our website and social media channels? Yes No

I, _____ understand that the Saskatchewan Safety Council may require verification of information contained in and related to this application in considering my suitability for any volunteer position. I hereby request and authorize anyone approached by the Saskatchewan Safety Council to provide them with any and all information requested to the best of their ability. I further understand and agree that any omission, false or misleading statement may result in dismissal if I am accepted as a volunteer. A photographic copy of this authorization shall be as valid as the original.

Date: _____

Signature: _____

Signature of parent/legal guardian if applicant is Age 16 or Under

Additional Information

Describe the personal interests, qualifications, or work experience that you feel make you an asset in the type of volunteer work for which you are applying:

How did you learn about our volunteer program?

- Council Website Facebook Twitter YouTube School
 Friend Tradeshow Safety Council Employee Other

Contacts and References

Contact for Workplace Confirmation

Name: _____ Relationship: _____

Phone: _____

School Contact

Name: _____ School: _____

Phone: _____

References

Please provide 2 references.

Name: _____ Relationship: _____

Phone: _____

Name: _____ Relationship: _____

Phone: _____

Communications

Please subscribe to our Volunteer News and any other Council stream that is of interest. It is recommended that you "safelist" @sasksafety.org in your email security settings to ensure consistent delivery of messages.