



Kingston Interval House Volunteer Application Form

Date: _____

Name: _____

D.O.B: _____

Primary Phone: _____

Mailing Address: _____

Email: _____

Preferred Contact Method: _____

Languages fluent in: _____

Place of Employment: _____

School Attending, Program, Year: _____

*****All volunteers at Kingston Interval House are required to have a current vulnerable sector police check (within 3 months). We also ask that the length of time since being a service user is a minimum of 1 year and would want you to be in a place of healing so there is not a negative impact on you*****

Please complete all questions

- 1. Why are you interested in volunteering at Kingston Interval House?**

- 2. What qualifications, skills, experiences, or interests can you share as a volunteer?**

3. What is your understanding of Kingston Interval House and the services that we provide?

4. Please indicate previous work or volunteer experience that is relevant and could enhance your volunteerism at Kingston Interval House?

5. What is your understanding of domestic violence and its effects on women?

6. What is your understanding of domestic violence and its effects on children?

7. How much time do you feel you can give to Kingston Interval House?

8. What volunteer areas are you interested in? Please check all that apply.

- Grocery Shopping
- Assisting with cooking/baking
- Childcare for programs
- Community Engagement (Events)
- Specific activities (i.e. yoga, sewing, etc.)
- Cleaning, helping to tidy areas, rooms
- Office support (stuffing letters, mail outs, etc.)
- Doing crafts with women
- Doing crafts with children
- Yard work/gardening
- Parent relief
- Organizing donation areas
- Provide peer support (to other volunteers)

Please provide the names and contact information for three references (other than family members please).

1. _____
2. _____
3. _____

By signing and submitting this Volunteer application, I acknowledge this information is true and accurate. I authorize Kingston Interval House to obtain references from the individuals listed above.

Signature: _____

Date: _____

Thank you for taking the time to fill out this volunteer application. If you have any questions, comments, or concerns please contact the Volunteer Coordinator at 613-305-0855 or trainingandeducationcoordinator@kingstonintervalhouse.com