



Volunteer Application Form

PERSONAL INFORMATION	
Date of application _____	
_____ Miss _____ Ms. _____ Mr. _____ Other	
Last Name _____	Given Name _____
Address _____	Phone number(s) Home: _____ Work/Cell: _____
Postal code _____	Email address _____
City, province and country _____	
How did you learn about Parks Canada Volunteer Program? ____ Parks Canada Employee ____ Friend ____ Colleague ____ Parks Canada website ____ Publication (specify) _____ ____ Other (specify) _____	What is your current age group? ____ Up to 18 years (parental consent required) ____ Between 19 and 89 years ____ 90 years or over (not covered by the National Volunteer Program Insurance Policy)

Your information is protected under the *Access to Information Act* and the *Privacy Act*. The personal information is only collected to administer the National Volunteer Program and will not be used for any other purpose

INFORMATION ABOUT YOUR INTERESTS
Where would you like to volunteer? Please specify a national parks, historic sites or marine conservation areas (list names if applicable). List available at: http://www.pc.gc.ca/eng/voyage-travel/index.aspx _____
What type of volunteer project interest you most? (NOTE - Activities are not available at all national parks, historic sites or marine conservation areas) ____ Special Events (example, concerts, festivals, sports events, community events, etc.) ____ Caretakers (example, weed pulling, shore cleanup, dune restoration, etc.) ____ Research Support (example, monitoring, wildlife and archaeological research, etc.) ____ Living History (example, costume interpretation, re-enactment, etc.) ____ Other(s) Please specify: _____



Which month(s) are you available? <input type="checkbox"/> Any time of year		
<input type="checkbox"/> January	<input type="checkbox"/> February	<input type="checkbox"/> March <input type="checkbox"/> April <input type="checkbox"/> May <input type="checkbox"/> June
<input type="checkbox"/> July	<input type="checkbox"/> August	<input type="checkbox"/> September <input type="checkbox"/> October <input type="checkbox"/> November <input type="checkbox"/> December
Which day(s)? <input type="checkbox"/> Any day		
<input type="checkbox"/> Monday	<input type="checkbox"/> Tuesday	<input type="checkbox"/> Wednesday <input type="checkbox"/> Thursday <input type="checkbox"/> Friday <input type="checkbox"/> Saturday <input type="checkbox"/> Sunday
How many hours per week? _____ I am available on an on-going basis		
Please specify your lodging requirements?		
<input type="checkbox"/> I will furnish my own lodging (such as tent, own, relative's or friend's place)		
<input type="checkbox"/> I will require assistance in finding lodging		

** Complete this section or submit a resume (C.V.) or attach additional pages, if you would like**

ABILITIES, EXPECTATIONS AND LIMITATIONS		
What is your current occupation?	In the list below, indicate your level of skill using these codes: T: some training or experience C: certificate or hold licence A: advanced (instructor level in the skill)	
What is your level of education?		
<input type="checkbox"/> Primary School	<input type="checkbox"/> General First Aid	<input type="checkbox"/> Cross-country ski
<input type="checkbox"/> Secondary School	<input type="checkbox"/> Cardiopulmonary Resuscitation (CPR)	<input type="checkbox"/> Photography
<input type="checkbox"/> College	<input type="checkbox"/> Emergency Medical Technician	<input type="checkbox"/> Public Speaking / Animation
<input type="checkbox"/> University - name speciality	<input type="checkbox"/> Water Safety	<input type="checkbox"/> Canoeing
<input type="checkbox"/> University post graduate - name speciality	<input type="checkbox"/> Search and Rescue	<input type="checkbox"/> Gardening
	<input type="checkbox"/> Archaeology	<input type="checkbox"/> Playing a musical instrument
		<input type="checkbox"/> Mountaineering
		<input type="checkbox"/> Conservation/Restoration
		<input type="checkbox"/> Wildlife research / monitoring
		<input type="checkbox"/> Sewing/knitting
		<input type="checkbox"/> Driver's licence- type of vehicle:
		<input type="checkbox"/> Other (please specify)
List language(s) in which you are fluent		

What are your expectations, goals or reasons for participating in the Parks Canada Volunteer Program?



Parks Canada / Parcs Canada



Describe your job experiences, previous volunteer experiences and your personal pursuits and interests that would contribute to your qualifications for the type of volunteer project you would like to do

What physical Limitations, if any, do you have that may restrict the type of project for which you may be considered? (eg. allergies, visual impairments or back problems)

Any additional comments?

Please return this form to the place(s) where you wish to volunteer.
Alternatively, to the National Volunteer Coordinator at
volunteer.coordinator@pc.gc.ca or by mail at:
National Volunteer Program, Parks Canada 25 Eddy Street, 6th floor,
Gatineau, QC, K1A 0M5