Société Alzheimer Society

VOLUNTEER APPLICATION FORM

Date:

Contact Information

First Name: Last Name:

Address:

City: Province: Postal Code:

Telephone: Email:

Preferred contact: ☐ Telephone ☐ Email

Emergency Contact

Full Name: Relationship:

Phone:

Additional Information

Language Spoken: ☐ English ☐ French ☐ Other:

Language Written: ☐ English ☐ French ☐ Other:

Please check off your areas of interest

☐ Administrative Support ☐ Special Events ☐ Health Promotion

☐ Health Bistro Adult Day Program ☐ Charitable Gaming Sudbury

Signature: Date:

(*Volunteer applicant*)

Parent/Guardian: Date:

Please note: A parent /guardian must also sign for volunteers under 18 years of age.

Commitment to Equitable Recruitment

The Alzheimer Society of Ontario recognizes the value and dignity of each individual and ensures everyone has genuine, open, and unhindered access to employment opportunities, free from any barriers, systemic or otherwise. We are dedicated to building a diverse and inclusive work environment, where the rights of all individuals and groups are protected and all members feel safe, respected, empowered, and valued for their contributions.

Our values include **justice** and **connection** and are the guideposts we use for decision-making of all kinds. We believe that this will guide the organization toward a place of inclusion for all - where equity and access to essential supports and services becomes the reality.

We are committed to inclusive, barrier-free recruitment and selection processes in accordance with the Human Rights Code and AODA. The Alzheimer Society of Ontario welcomes those who have demonstrated a commitment to upholding the values of equity and social justice and we encourage applications from First Nations, Inuit and Métis, Indigenous Peoples of North America, Black and persons of colour, persons with disabilities, people living with dementia, care partners and those who identify as LGBTQ2S+.

We respect your privacy. The Alzheimer Society collects your personal information in order to help identify and align suitable volunteers and opportunities. Only authorized Alzheimer Society staff and/or volunteers access this information. For more information about our privacy policy go to www.alzheimerontario.ca

Thank you for completing this form.

Applicants will be contacted to discuss suitability and current opportunities.

Please be advised, should you be selected as a volunteer with the Alzheimer Society you will be required to provide personal character references and a police check.

Mail, fax or e-mail this form to:
Alzheimer Society Sudbury-Manitoulin North Bay & Districts
960B Notre Dame Ave, Sudbury, Ontario, P3A 2T4 Telephone:
705-560-0603
Fax: 705-560-6938
Email: info@alzheimersudbury.ca