



VOLUNTEER APPLICATION

Thank you for your interest in volunteering with the Moose Jaw & District Food Bank.

We are a not-for-profit registered charity founded in 1984, whose mission is to help end hunger and the root causes of food insecurity in our community.

Achieving this mission is dependent upon the generosity and skills of volunteers just like you. Please fill out the application form below so that we may best match your skills and interests with the needs of the food bank. Please note that a criminal record check may be required for some volunteer positions involving the public, and that children under the age of 16 must be accompanied by an adult.

If you have any questions, or would like more information on current volunteer opportunities, we would love to hear from you.

Personal Information

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First and Last Name

Birthdate: MM/DD/YYYY

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Address

City, Province

Postal Code

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Home Phone

Cell Phone

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Email

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Emergency Contact (include relationship to contact)

Phone

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Name of organization or group (if applying on behalf of a group)

Number of people in your group

Availability

Monday	Tuesday	Wednesday	Thursday	Friday
Morning <input type="checkbox"/>	Morning <input type="checkbox"/>	Morning <input type="checkbox"/>	Morning <input type="checkbox"/>	Morning <input type="checkbox"/>
Afternoon <input type="checkbox"/>	Afternoon <input type="checkbox"/>	Afternoon <input type="checkbox"/>	Afternoon <input type="checkbox"/>	Afternoon <input type="checkbox"/>

Please provide any additional details regarding your availability:

Positions

General Cleaning and Maintenance (*sweeping, mopping, wiping counters, etc.*)

Harvest Pantry (*greeting shoppers, restocking shelves, assisting shoppers*)

Warehouse (*sorting donations, building hampers*)

Donation Pick up (*assisting the driver with donation pick ups,*)

Event Planning (*assisting with event planning, setup, help during the event, and take down following the event.*)

Client Resources (*case management assistance. A criminal record check is mandatory to volunteer in this program.*)

Please check the box to confirm you are capable of lifting up 30lbs?

Applicant's Signature

Date MM/DD/YYYY