Non-resident Resident

Volunteer Application Form



Mr. / Mrs. / Ms. / Miss. / Dr.	(Please in	dicate	お選びくだ	さい)				
Name (ローマ字)					Kanj	i(氏名	: 漢字)	
Date of Birth(生年月日)			Visa 9	 Status (ビ	ずの種類)			
MM (月) DD (日) YYYY (年)	□Citizen □Perman	ent Re			iday □Wo	rk permit	□Student	
	□Visitor □Other	()	,	•		
				1				
Address (住所)				City			Pos	tal Code
Telephone	Cell			Others				
Email Address				Emerge	ency Contact	:(緊急連絡	先)	
Volunteer availability:								
ボランティア活動について					1	ı		
			Mon	Tue	Wed	Thu	Fri	Sat & Sun
What time are you available for voluntee ボランティアをしていただける曜日と時間:	•	AM						
WAY A A TO CA TOTAL SHELL CHAIN	111144	PM						
Have after would you be able to 2		-\\/-	-Markhy - Dissable - Israel - Essat - Israel					
How often would you be able to? どのぐらいの頻度でボランティアできます:	か	□Weekly □Biweekly □/month □Event only 毎週 隔週 月()回 イベントのみ						
What is your surrent ampleyment status	3		□Employed • • • If yes □Full time □Part time □Self employed □Seeking employment □Student □Home duties					
What is your current employment status 現在の雇用状態を教えてください。		□Retired □Pensioner						
January Marie Dave C. Cree C. 1		□Other ()						
How long are you thinking of volunteering with TG?								
いつまでボランティアをしていただけます								
If you are not a permanent resident of Ca		ou stay	ing?					
カナダ市民、移民でない方は、いつまでカナダに滞在しますか?								
Please describe any relevant work,	hobbies talent or	educa	tion evneri	ience:				
資格、趣味、特技、経験した職種				crice.				
Hobbies			Certificates & skills 資格 & 特技					
Work & education experience 職歷 & 学歴			Language ability					
·								
WUIN .			□ English (□speak □write □read □listen) □ Japanese (□speak □write □read □listen)					
Education :			□ Other (
List previous volunteer experience ボランティア経験								
	· / · / · / //\\\\\\\\\\\\\\\\\\\\\\\\							

Transportation 隣組までの利用交通機関は?	Driver's license & experience カナダでの運転免許と運転歴
□ Bus □ Car □ Walk	Driver's license Yes No Experience (years)
Do you have your own car? □Yes □No If	yes: Are you comfortable using your car for TG volunteering? □Yes □No

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Why do you want to volunteer? ボラン	ティア希望動機
What are your interests? (Please check)	興味のあることに、できることにoをしてください。
□Cooking 料理	□ Cleaning 掃除
□ Baking お菓子作り	□ Maintenance メンテナンス/修理
□ Delivery デリバリー (物を運ぶ)	□ Handyman 大工
o Driver ドライバー (人の送迎)	□Computer maintenance コンピュータ修理
□ Crafts クラフト	□ Fundraising 資金調達
□ Child care 子供の遊び相手	□ Event planning イベント運営アシスタント
□ Cliffic Care 1 英の近り相子	□ Special events イベント
□ Office work 事務作業	
□ Data entry データ入力	□ Entertainment エンターテイメント (演奏・演芸等)
□Typing タイピング	□ Exercise スポーツ・体操指導
□ Telephone/Reception 電話・受付業務	(What) □ Walking/Hiking ウォーキング・ハイキング
uWriting ライター	□ Walking/Hiking リオーキング・ハイキング □ Gateball ゲートボール
□ Editing 編集	□ Gateball // — トルール
□ Website design ウェブデザイン	□ Origami 折り紙
□ Graphic design グラフィックデザイン	□ Calligraphy 書道
□ Photograph 写真撮影	□ Japanese tea ceremony 茶道
□ Video editing ビデオ編集	□ Japanese flower arrangement 華道
□ Library 図書管理	□ Kimono dressing 着物着付け
□ Video Library ビデオ管理	□ Others その他(
Tarabina カラフナー教シフ	□ Others その地(
□ Teaching クラスを教える (What)	□Visitation 高齢者訪問(自宅・施設)
(what)	□Telephone buddy 高齢者電話相手
□ Research リサーチ	□ Senior care 高齢者介助
□ Translation 翻訳	□ Shopping assist 買い物介助
□ Interpretation 通訳	□ Outing assist 外出介助(車椅子含む)
	□ Medical escort 病院付き添い(通訳含む)
□ Blood pressure clinic 血圧測定	

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REFERENCES: Please provide two references (school, business or volunteer related, no family or friends):

Deference #1.				
Reference #1: NAME:	Tel#	Affiliation	:	
CHECK (by TG):				
Reference #2:				
NAME:	Tel#	Affiliation	:	
CHECK (by TG)	I	I		
CRIMINAL RECORD CHEC Tonari Gumi seeks to prote appropriate screening measu	ect participants, vol			• •
understand that I do not hav exclude me from being consider	e to agree to this ba	ackground check, but		•
If requested, are you willing t	o submit to a crimina	al record check?	Yes	No No
VOLUNTEER DRIVER REQ	UIREMENTS			
Anyone who is required to a cauthorized services on behalf included in your personal file: • Valid BC Driver's Licen	drive vehicle on beha of Tonari Gumi must : se in good standing.			
 A current Driver's Abs 	tract.			

Valid vehicle insurance if using your own vehicle.

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VOLUNTEER ACKNOWLEDGEMENT

As a volunteer with the organization, I agree to the following:

- 1. To provide my time and service without remuneration.
- 2. To support the principles of the organization and the implementation of the organization's mission while on duty as a volunteer
- 3. To maintain strict confidentiality.
- 4. To adhere to the smoke free environment.
- 5. To attend a formal volunteer orientation and to participate in designated training sessions when provided to help in my volunteer assignment.
- 6. To adhere to the Tonari Gumi policies, rules and regulations.
- 7. To fulfill the volunteer hours agreed upon.
- 8. To volunteer for this organization for a minimum of three months.
- 9. I understand that false information on this application may be cause for termination of volunteer service.

I and conditions of volunteering for T	
I agree to abide by the organization to do so may result in my termination	's policies and procedures and understand that failure on as a volunteer
Sign:	Date:
Witness:	Date:

Tonari Gumi respects your privacy. We never release your information to other organizations. Also, we never release your information to members, volunteers or any other individual without your consent.

隣組は、会員、ボランティアの皆様の個人情報を尊重し、その保護の重要性を認識しております。 会員の個人情報は、他の機関、会員、ボランティアなどの第三者にご本人の同意なしに、提供することは致しません。