

## **Township of The Archipelago Volunteer Application**

| Contact Information         |  |       |       |      |    |
|-----------------------------|--|-------|-------|------|----|
| Name:                       |  |       |       |      |    |
| Street Address:             | City:  |       |       |      |    |
| Province:                   | Postal Code:   |       |       |      |    |
| Telephone Number            |  |       |       |      |    |
| Email Address:              |  |       |       |      |    |
| Volunteer Information       |  |       |       |      |    |
| Have you volunteered with   | the Township of the Archipelago in the past?   |       | Yes   |      | No |
| Do you have any criminal of | convictions for which you have not received a pardon?  |       | Yes   |      | No |
| What volunteer position are | e you applying for?  |       |       |      |    |
|                             |  |       |       |      |    |
| Why are you interested in   | volunteering with the Township of The Archipelago?   |       |       |      |    |
|                             |  |       |       |      |    |
|                             |  |       |       |      |    |
|                             |  |       |       |      |    |
| , .                         | ous experience (i.e. employment, volunteer, training, skiller position you are applying for? | ls, e | educa | tion | )  |

The personal information on this form is collected under the authority of the Municipal Act. The information is used for the purpose of processing the Proclamation Request Form. Questions about this collection of information can be made to the Township of The Archipelago's Municipal Clerk. mmartin@thearchipalago.ca.