

VOLUNTEER APPLICATION

Date:	
(m/d/y)	
First Name:	Last Name:
Telephone Number:	Email:
Address:	Postal Code:
Emergency Contact Name:	Emergency Contact Number:
Gender/Preferred Pronouns (optional):	
Note: We understand that identities change. The any time. This question is for your comfort and c	e choice to share or change your pronouns is yours at convenience, not ours.
Do you identify as Indigenous?	NO PREFER NOT TO SAY
Ethnicity (optional):	
Age: UNDER 19 19-29	30-49 50-66 66+
Do you have any health concerns or disabilities that	may impact the nature of your work?
YES NO	PREFER NOT TO SAY
If so, how can we work towards your strengths? Are for long periods of time, going to new places/meetin	any activities difficult or unreasonable for you (ex. Sitting new people, hearing on videoconference, etc)?

Why are we collecting this information? We hope to recruit a diverse range of volunteers to best represent our community. If you have questions about this application, please contact the Program Coordinator (qCJ@liftcommunityservices.org or 604-414-4203).

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Have you ever been charged for a criminal offense?	YES	NO		
Note: All qCJ volunteers must complete a crimin record does not disqualify you from working with system can often provide a helpful perspective in	qCJ. In fact, experience wi	ith the criminal justice		
What role or skill are you hoping to contribute to qCJ? Check all that apply.				
Circle Keeper/Facilitator Case Coordinator Mentor Committee Member Community Advisor Delivering Training/Workshops Other:	Fundraising Marketing Technical Support Administrative Suppor Event Planning Don't know	rt		
What length of time are you willing to commit to volunteering with qCJ?				
6 months 2 years	1 year More than 2 years			
How frequently do you envision yourself volunteering with qCJ?				
Weekly Monthly	Bi-weekly As needed			
What is your general availability?				
Morning (8am-noon)	Afternoon (noon-5pm)	Evening (5pm-9pm)		
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
My schedule is too unpredictable to provide ge	neral availability.			

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What relevant experience (work, volunteer, life experience	e, etc) do you have that would be beneficial to qCJ?
Do you have any formal conflict resolution or community Certificate, Mediation, Social Work, Substance-Use, Cour	
If YES, list name of course/certificate/program(s):	
What does Restorative Justice mean to you?	
Is there anything else you would like to share that may be	helpful for us to know?
How did you hear about us?	
Word of mouth qCJ Newsletter Other:	Newspaper Social Media

Thank you for your interest in volunteering with qathet Community Justice. Please send completed application form to <u>qCJ@liftcommunityservices.org</u> or drop off at Lift Headquarters, #218-6975 Alberni St, Powell River, BC.

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