

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 choice to share or change your pronouns is yours at any time. This question is for your comfort and 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 g new people, hearing on videoconference, etc)?		

Why are we collecting personal information like age, gender, ethnicity and ability? We hope to recruit a diverse range of volunteers to best represent our community. Your personal information will be shared with qCJ staff and may be shared with the Volunteer Training and Engagement Committee. If you become a volunteer, demographic information may be shared with funders but not attached to your name. If you have questions about this application or our privacy policy, please contact Siobhan at qCJ@qathetCJ.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 wit	th the criminal justice		
What role or skill are you hoping to contribute to qCJ? Check all that apply.				
Circle Keeper/Facilitator Case	Fundraising			
Coordinator	Marketing			
Mentor	Technical Support			
Community Engagement	Administrative Support	t		
Youth/Schools Program	Event Planning			
Volunteer Support/Training	I'm not sure, I need mo	ore information		
Other:	_			
What length of time are you willing to commit to volunteering with qCJ?				
6 months	1 year			
2 years	More than 2 years			
How frequently do you envision yourself volunteerin Weekly Monthly	g with qCJ? 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 general 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, Cou	
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 $\underline{qCJ}@qathetCJ.org$ or arrange to drop off at our office. Please do not drop in our mailbox as it is not secure.

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