THE MOUNT
CONTINUING CARE COMMUNITY

Application Form: The Mount General Volunteer Program

When completed, please email this form to activities@themountcommunity.ca, and we will reach out to discuss next steps once your application has been reviewed. Thank you for your interest!

1. Name:

   _____

2. Date of Birth:

   _____

3. Address:

   _____

4. Phone number:

   _____

5. Email address:

   _____

6. Occupation and/or School Program:

   _____

7. Person to contact in case of emergency (& phone number)

   _____

8. Work & Volunteer Experience

   _____

   _____

   _____

9. Please tell us about your special interests, skills, or hobbies– this helps us learn a bit about you, and match you with an enjoyable volunteering opportunity!

   _____

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   _____

10. Why do you wish to volunteer at The Mount?

_____

_____

_____

11. What kind of volunteer assignment are you interested in? Check all that apply.
    - ☐ Performing/Entertaining (Music, storytelling, dance…)
    - ☐ Leading/Facilitating group activities, lessons, clubs, etc. (Crafts, Leading a choir/sing-alongs, Yoga, Mindfulness, Baking…)
    - ☐ Behind-the-Scenes tasks (Seasonal decorating and/or window painting, Garden maintenance, Houseplant care, Library organization…)
    - ☐ 1:1 Resident companionship visits
12. Please provide two references (other than family) & their contact information:

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13. Do you have any health restrictions that might affect your volunteering at The Mount?

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14. Volunteer Availability: Which day(s) & times would you like to volunteer, and how frequently?

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