



CATEGORY: JOB DESCRIPTION  
JOB TITLE: **Volunteer (s) & Application**  
CATEGORY NUMBER: JD-710-11

**Report to:** Lodge Manager

**Hours of Work:** As designated by the Manager

**Probation Period:** Three (3) Months

**Position Summary:**

- The Volunteer (s) will be responsible to the Activity Co-ordinator & Lodge Manager and assist with activities for the residents at the lodge.

**Duties and Responsibilities:**

- All Volunteers must be oriented to the Foundation by the Lodge Manager or Designate (Form L02).
- All Volunteers are to maintain a professional relationship with the residents of the lodge by performing the duties identified for this position in a courteous, efficient manner.
- To encourage social interaction between residents and the community at large.
- To encourage the independence of each resident.
- To work cooperatively and confidentially with the Activity Co-ordinator and Lodge Manager.
- Adhere to and participate in the Health and Safety Procedures and Policies of the Foundation.
- Perform all duties in a safe and efficient manner.
- Ability to work effectively with other volunteers.
- Must follow the defined lines of communication.

**Qualifications:**

- Ability to work closely with senior citizens.
- Good communication skills.
- Formal education in an area related to recreation or service to seniors would be an asset.



GREATER NORTH FOUNDATION  
"Affordable Senior & Community Housing"

**VOLUNTEER APPLICATION**

**Full Name:**  
(Please Print)

**Date of Birth:** dd/\_\_\_mo/\_\_\_yr/\_\_\_\_

**Address:**

City/Town

Postal Code

**Telephone:**

Home: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

**Emergency Contact:**

**Phone #:**

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1. Have you volunteered for a similar organization as this before? YES  NO  (check one)

**Where?**

**List Duties:**



2. What skills do you have to offer? (Crafting, woodworking, painting, musical, reading, listening, etc)

**List Your Skills:→**

3. Why do you wish to volunteer with us?

**List Your Reasons:→**

4. **Best time(s) for me to Volunteer is:**  Mornings  Afternoons  Evenings  Weekends (check one)

5. **Date Available to Start:**

dd/ \_\_\_Mo/\_\_\_\_ Yr/\_\_\_\_

6. **Are you a;**  Student  Retired  Other (check one)

7. **List References and Phone Numbers:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date:

**A CRIMINAL RECORDS CHECK WILL BE REQUIRED FROM ALL PERSONS VOLUNTEERING WITH OUR FOUNDATION**

For Office Use Only: (Staff Comments)