



Volunteer Opportunity

**Please print clearly*

Organization Information

Date of Submission: _____

Organization: _____

Phone: _____ Fax: _____

Email: _____

Website: _____

Mission Statement: _____

Position Information

Volunteer Opportunity: _____

Date(s): _____ # Volunteers: _____

Work Location: _____

Date to be posted: _____ Date to remove posting: _____

Time Commitment

Frequency: One Day Weekly Bi-Weekly Monthly Seasonal

One Day Event Date: _____

-OR- Project Timeline: Start Date: _____

End Date/Ongoing: _____

If Specific Days or Times Required

DAY(S):	<input type="checkbox"/> Mon.	<input type="checkbox"/> Tues.	<input type="checkbox"/> Wed.	<input type="checkbox"/> Thurs.	<input type="checkbox"/> Fri.	<input type="checkbox"/> Sat.	<input type="checkbox"/> Sun.
TIME(S):							

- Type of Position: Special Event Meals on Wheels Community Hours
 Senior's Services Youth Services School Event
 Sports & Recreation Gardening & Horticulture Board of Directors
 Educational (Tutor, ESL) Culture & Crafts - Arts, Heritage, Library, Theater etc.
 Victim Services / Justice Practicum/Intern - High School or College/University
 Other: _____

Benefits & Recognition Provided to Volunteer: _____



Qualifications (attributes & experience required): _____

Position Requirements

Vehicle: One Day Weekly If yes, License Class: _____
Security Clearance: Yes No
Gender: Male Female Minimum Age: _____
Age Range: Youth 12-14 Youth 15-17 Adult 18-64 65+ Years
Training: Yes No
Orientation: Yes No

Contact Information for Volunteer Opportunity

** Please complete contact information for the individual volunteers will contact for the position. This may or may not be the person filling out the form.*

Name: _____

Phone: _____

Email: _____

Contact Hours: _____

The City of Leduc provides this service for information purposes only to connect volunteers with organizations seeking volunteer services. The City of Leduc makes no warranties about the suitability of volunteers contacting organizations for opportunities.

Please drop off, mail or email completed application to:

Volunteer Leduc, Attn: Volunteer Coordinator,
City of Leduc Civic Centre, #1 Alexandra Park,
Leduc, Alberta, T9E 4C4.

Volunteer@leduc.ca

Personal Information is collected in accordance with section 33(c) of the Freedom of Information and Protection of Privacy Act (FOIP) and is protected by FOIP. If you have any questions about the collection and use of the information, please contact the City Clerk at (780) 980-7132 at #1 Alexandra Park, Leduc, AB, T9E 4C4.

September 2011
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OFFICE USE ONLY

Date Received: _____