

Volunteering at the Villages of Halton

Volunteer Application Checklist

1. Complete a Volunteer Application
2. Dial 311 to set up an interview with a life enrichment supervisor at one of Halton Region's three long-term care homes:
 - Allendale (Milton)
 - Creek Way Village (Burlington)
 - Post Inn Village (Oakville)
3. Complete the following:
 - a. Provide two written reference letters
 - b. Provide a current Police Check (completed within the past 6 months)
 - c. Complete a 2-Step TB Test.
 - d. Get a flu shot (if volunteering between the months of November- April)

For further information, please visit halton.ca or dial 311.

Villages of Halton Volunteer Application Form

Section one - To be completed by all applicants

Name: _____

Title: Mr. Mrs Ms Miss None

Address: _____

Home Phone: _____ Work Phone: _____

Cell Phone: _____ Email: _____

Emergency contact name: _____ Phone number: _____

Relationship: _____

What volunteer experience do you have?: _____

What any work experience do you have?: _____

Languages spoken: _____

When are you able to volunteer?

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Morning							
Afternoon							
Evening							

Section two – To be completed by all applicants

Two-step Tuberculosis (TB) test

You must bring a copy of a current (within the last six months) two-step TB test prior to starting your volunteer placement.

Any person working directly with residents or are in areas where residents congregate will be required to have a two-step TB test regardless of age.

Section three – To be completed by all applicants

Police Security Check

You must bring a copy of a current Police Security Check prior to starting your volunteer placement.

Any person working with vulnerable people (children, older adults, disabled persons, or in positions of trust) will be required to have a Police Security Check at age 16 or older.

Personal information on this application form is collected pursuant to the Municipal Act, 2001, S.O. 2001, c. 25, and will be used to assess your eligibility as a volunteer employee for Halton Region’s Services for Seniors’ Program. Questions regarding the collection of your personal information can be addressed to the Freedom of Information and Privacy Coordinator, 1151 Bronte Road, Oakville, ON L6M 3L1, 1-866-442-5866.

If you are planning to volunteer between the months of December and June, you will require a seasonal flu shot and must provide a flu shot record. The Villages of Halton provide flu shots to volunteers before flu season or you can make an appointment with your doctor.

Section four – To be completed by all applicants

Reference letters

You must provide copies of two reference letters prior to starting your volunteer placement.

Section five - To be completed by all applicants

I understand that if I am accepted as a volunteer, I will be expected to volunteer on the dates/times for which I am scheduled, and that I will inform my supervisor in advance if I am unable to attend. **If I do not show up for my volunteer placement without calling my supervisor on three separate occasions, I may be terminated from my role.** I further understand that volunteering is a commitment which I will do my best to fulfill in order to support and assist the clients/residents with whom I will be working.

Signed: _____ Date: _____

Section six - To be completed by applicants 16 years of age or younger

Please note: the minimum age requirement to become a volunteer with the Villages of Halton is 14 years of age.

I, _____ being the parent/guardian of _____ do hereby give my consent to him/her to undertake this volunteer opportunity with the Villages of Halton. I understand that this is a commitment and that the applicant is expected to attend on the dates and times specified by their supervisor.

Signed: _____ Date: _____

Section seven – To be completed by all applicants

Services for Seniors Volunteer program - Waiver and Acknowledgement for Volunteers

I, _____ acknowledge that I will provide services on a volunteer basis wherein I will occupy the position of and perform only the duties as assigned by my supervisor.

I understand that in performing the duties assigned by my supervisor, I will not perform in any supervisory capacity nor operate any machinery or equipment for which I have not been trained or that comes within the purview of a union contract.

I understand that I will not be paid for the services I provide, nor will I be entitled to any benefits normally provided by Halton Region. I acknowledge that this is not a contract of employment. I will be responsible for my own health insurance.

I agree to release and discharge Halton Region, its councillors, employees and agents from and against all claims and proceedings in respect of any damage or injury sustained by myself arising by reason of my provision of these services.

Signature of applicant: _____ Date: _____

Signature of parent/guardian: _____ Date: _____
(if volunteer is under 16 years)

We are grateful for your interest in volunteering.
It will make a big difference to the lives of our residents and clients.

For more information, please contact:

Halton Region
Address: 1151 Bronte Road, Oakville
Website: halton.ca
Phone: Dial 311 or 905-825-6000
Toll Free: 1-866-442-5866 (1-866-4HALTON)
TTY: 905-827-9833
Fax: 905-825-9010
Email: accesshalton@halton.ca

*Please note that your responses are voluntary and will be confidential. Responses will not be identified by individual.
All responses will be compiled together and analyzed as a group.

