



VOLUNTEER PROFILE APPLICATION

Thank you for your interest in Second Harvest!

Dedicated and committed volunteers are the backbone of Second Harvest, and are valuable team members in our goal to feed people in need across the Greater Toronto Area. The time commitment can be as great or as little as your schedule permits.

Upon completing this application, send to Marjorie Richards at marjorier@secondharvest.ca or fax to 416-408-2598.

A) **TODAY'S DATE:** _____

B) **PERSONAL INFORMATION** (Complete in full.)

Date of Birth: _____ DD/MM/YYYY (year is optional if over 18)

First Name: _____ Last Name: _____

Street Address: _____ City: _____ Postal Code: _____

Phone (Home): _____ Cell: _____ Email: _____

Phone (Work): _____ Student Employed Retired Other

C) **EMERGENCY CONTACT INFORMATION** (Complete in full.)

First Name: _____ Last Name: _____ Relationship (e.g., mother, friend): _____

Please check and complete the best way to contact:

Day Phone: _____ Evening Phone: _____ Cell: _____

D) Have you ever been charged or convicted with a criminal offense? Yes No

E) **WHY DO YOU WANT TO VOLUNTEER WITH SECOND HARVEST?** (Check all that apply.)

- Desire to help others
- Put experience in Food Service to use
- Have fun and meet interesting people
- Interest in community involvement
- Put spare time to use
- Ontario Works, ODSP, Social Services, etc.
- Court ordered community service
- School Community Hours
- Help out with events
- Gain Canadian/English experience
- Other (please specify) _____

F) **YOUR AVAILABILITY TO VOLUNTEER**

| | Morning | Afternoon | Evening | # of hours/day |
|-----------|--------------------------|--------------------------|--------------------------|----------------|
| Sunday | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| Monday | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| Tuesday | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| Wednesday | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| Thursday | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| Friday | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |
| Saturday | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | ___ |

Expected Duration of Volunteering Commitment (i.e., # of months OR number of hours you wish to complete.): _____

F) Will you require a letter confirming the number of volunteer hours you have completed? Yes No

G) **HOW DID YOU HEAR ABOUT SECOND HARVEST?** _____

H) **EDUCATION:** _____

I) **LANGUAGES:** _____

J) **VOLUNTEER AREA(S) WHICH INTERESTS YOU: (Check all that apply.)**

- OFFICE/ADMINISTRATIVE**, could include reception/telephone work, mailings, filing, project support, outbound call projects, data entry, research, and other computer work (*Weekdays, regular business hours*)
- OPERATIONS, including:**
- Driver's Assistant** – accompany our drivers on a Second Harvest truck, helping to pick up food from donors and make deliveries to social service agencies across the Greater Toronto Area. *Includes some lifting. (Weekdays 8:00am start; weekends 9:00am start)*
 - Warehouse Assistant** - sorting food into categories, weighing, repacking into boxes for drivers to load onto trucks. *Includes some lifting and warehouse clean-up / maintenance. (Weekdays 9:00am and 12:00pm)*
 - Volunteer Driver** - St. Lawrence Market (must have access to vehicle and valid Driver's License)
- EVENTS, including:**
- | | | |
|---|---|--|
| <input type="checkbox"/> Hero Day (February) | <input type="checkbox"/> Toronto Taste (June) | <input type="checkbox"/> Turkey Drive (December) |
| <input type="checkbox"/> Community Events (ongoing) | <input type="checkbox"/> Pre-event assistance | <input type="checkbox"/> Assist on event day(s) |
| <input type="checkbox"/> Team Lead (on event day) | <input type="checkbox"/> Committee Work | <input type="checkbox"/> Food rescue/collections |
| <input type="checkbox"/> Community Ambassador | <input type="checkbox"/> Youth Opportunities | |

K) **SKILLS & ABILITIES:** (This section will help us find the best match between your skills and volunteer opportunities.)

- COMPUTER:** Word PowerPoint Graphic design Web design
 Excel Access iMIS database Other databases _____
- OPERATIONS:** lifting to ___ lbs NO LIFTING Handyman/Carpentry/Construction
- ADMINISTRATION:** Organizational Human Resources People Management Project Management
 Sales/Marketing Writing/editing Public Speaking Communications/PR

L) **EXPERIENCE**

Additional skills, experience, or training you have which you think may be of use to Second Harvest: _____

Other volunteer experience you may have with other organizations (briefly outline the work you did and when): _____

M) **HEALTH & SAFETY**

i) **Do you have any health concerns and/or special needs that we should know about prior to assigning you to particular volunteer tasks** (e.g., allergy to food/food ingredients, bad back, etc.) Yes No

ii) If YES, please describe: _____



N: ACCESSIBILITY FOR ONTARIANS WITH DISABILITIES ACT (AODA)

i) Have you received AODA Training?

Yes

No

ii) If YES, please provide the date of training: _____

O) Would you like to receive our monthly eNewsletter?

Yes

No

VOLUNTEER CONFIDENTIALITY AGREEMENT

Second Harvest's mission is to help feed hungry people by picking up and preparing excess fresh food and delivering it daily to social service agencies in Toronto. Our vision is that no one need ever go hungry in the communities we serve.

Second Harvest relies heavily on our volunteers to assist in the day to day operations of our organization. Volunteers may be required to assist in activities including but not limited to office administration, data entry, operations, events, fundraising and driver's assistance. Because we are a charitable organization, all volunteers are required to maintain strict confidentiality. This means that no person shall reveal any information regarding the details of financial documentation or information he/she may become privy to as a consequence of their volunteer activities at Second Harvest unless specifically authorized to do so. In addition, no person shall reveal the identification or source of food donations unless specifically authorized to do so.

PHOTO RELEASE AGREEMENT

I give permission to Second Harvest and/or partners to take photographs/video footage of myself/dependent or obtain information from me throughout the course of an interview. This footage/information will be used to promote the work of Second Harvest.

Yes

No

By signing this Application, you are acknowledging that you have read, understood and agree to the terms outlined above.

NAME: _____

Please print in full

SIGNATURE: _____

DATE: _____

PARENT/GUARDIAN SIGNATURE: _____
(if 17 years of age or younger)

DATE: _____