



VOLUNTEER APPLICATION PACKAGE

Steps to volunteering with Panorama Recreation:

- STEP 1
 - Please complete the attached Application Form (parts 1-6). Completed applications can be returned to Panorama Reception or Greenglade Reception.

- STEP 2
 - Following your submission and review of your application you may be asked to meet with a recreation coordinator to discuss your suitability, availability and interest in volunteering. References may be contacted.

- STEP 3
 - If a suitable volunteer opportunity is available you will be contacted by a recreation coordinator and will be required to complete a criminal record check (free of charge). A criminal record check letter will be available for pick-up at reception (location indicated by coordinator) and will need to be brought to your local police department.

- STEP 4
 - Once your criminal record check has been processed, please notify the recreation coordinator and we will arrange for a volunteer orientation.

Volunteer Philosophy: To engage citizens of the Saanich Peninsula in meaningful volunteer placements that will provide the opportunity to gain work experience and new skills, meet new people, enrich lives and give back to the community.

Benefits of Volunteering with Panorama Recreation:

- ✓ Gain employability skills through training and volunteer experiences
- ✓ Gain professional experience for potential career interest
- ✓ Meet new people and give back to your community
- ✓ Receive support from staff and recreation coordinators
- ✓ Complete your volunteer hours required for graduation
- ✓ Depending on commitment, may be eligible for facility access

Further questions? Call Panorama Reception at 250-656-7271 OR Greenglade Reception at 250-656-7055 and they will direct you to the appropriate recreation coordinator depending on the department area you are interested in volunteering



VOLUNTEER APPLICATION FORM

Received:

Part 1:

Applicant Information:

Name:		
Address:	City:	Postal Code:
Home Phone:	Cell Phone:	
Date of Birth: YYYY/MM/DD	Email Address:	

Emergency Contact:

Name:	Relationship to you:
Home Phone:	Cell Phone:

Volunteer position applying for (if applicable): _____

Skills, experience or certifications relevant to the position applied for (Aquatics/Fitness see below): _____

Part 2

Aquatics only:

Please check off complete awards and list expiry:

<input type="checkbox"/> Bronze Cross	<input type="checkbox"/> NLS	<input type="checkbox"/> CPRC	<input type="checkbox"/> WSI	<input type="checkbox"/> SFA
Expiry:	Expiry:	Expiry:	Expiry:	Expiry:

Have you completed WSI step 1?

- Yes
 No

Are you completing WSI hours?

- Yes
 No

Fitness only:

Please check off complete awards:

<input type="checkbox"/> BCRPA	<input type="checkbox"/> CSEP	<input type="checkbox"/> NSCA	<input type="checkbox"/> CanFit Pro	<input type="checkbox"/> First Aid/CPR
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Part 3:

Which areas are you most interested in volunteering:

Aquatics	Programs & Arena	Fitness	Other
<input type="checkbox"/> Shadow guard	<input type="checkbox"/> Day Camps	<input type="checkbox"/> Rehab Programs	<input type="checkbox"/>
<input type="checkbox"/> Swim lessons	<input type="checkbox"/> Kindergym	<input type="checkbox"/> Instructor Shadow	<input type="checkbox"/>
<input type="checkbox"/> Fun Leading	<input type="checkbox"/> Birthday Parties	<input type="checkbox"/> Personal Training	<input type="checkbox"/>
<input type="checkbox"/> Camps	<input type="checkbox"/> Cooking/Art Programs	<input type="checkbox"/> Take Heart	<input type="checkbox"/>
<input type="checkbox"/> Birthday Parties	<input type="checkbox"/> Special Events	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/> Skating Lessons/Arena		

Which age group(s) are you most interested in volunteering with:

<input type="checkbox"/> Preschool	<input type="checkbox"/> Teens	<input type="checkbox"/> Seniors
<input type="checkbox"/> School Age	<input type="checkbox"/> Adults	

Part 4:

Please indicate your current availability (i.e. Mon 9-11am):

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Please indicate the number of hours/week or hours/month that you are able to volunteer: _____

Part 5:

REFERENCES: Please list personal or professional references that we may contact if needed:

Name	Phone #	Relationship	Occupation
1. _____			
2. _____			
3. _____			

Part 6:

Authorizations:

I understand that my services must be in conformance with the tasks described in the volunteer position description or orientation session.

I understand that in the event of a personal injury I am not covered by WCB but instead would be eligible for benefits under the CRD Volunteer AD&D policy (subject to terms and conditions).

I understand that I am responsible for the safety and security of all my property and possessions.

I understand that a criminal record check will be required (free of charge).

I understand that the District will indemnify me against any claims for damages arising out of the performance of my duties and, in addition, pay amounts required for the protection, defense, or indemnification arising therefrom provided that I am not guilty of dishonesty, gross negligence, or willful misconduct, or the cause of the action libel or slander.

SIGNED this ____ day of _____ 200 ____.

Signature

Thank you for your interest in volunteering with Panorama Recreation! Please return your complete application to the reception desk. The coordinator for the appropriate department/position will contact you soon.

FOR OFFICE USE ONLY

Coordinator: _____

Date Contacted: _____

Notes: _____
