



Volunteer Application

Office use only

Date received:

Resume/cover letter received

Reference checked

Education Session Date:

Interview Date:

On call Yes No

Cultural/confidentiality agreement

Area of volunteering:

Please include your resume and a short cover letter with your application. Applications can be returned via email to volunteering@inspirehealth.ca or to InspireHealth directly.

Name: _____ Gender: ___ Male ___ Female ___ Other
Preferred Phone #: _____ Email: _____
Address: _____ Birthdate: _____
Emergency Contact: _____ Relationship: _____ Phone #: _____
Primary Language: _____ Secondary Language(s): _____
Overall Health and well-being : ___ Good ___ Fair ___ Poor
Please comment on any relevant health conditions or disabilities:

Are you currently a student? (circle answer): Yes / No Full-Time / Part-Time
Name of Institution: _____ Field of Study: _____
Are you on a Placement / Practicum? Yes / No
If yes, what is the length of your intended placement with InspireHealth? _____

Are you presently employed? (circle answer): Yes / No Full-Time / Part-Time
Place of Employment: _____ Your Position: _____

Please provide one business reference (former employer, current supervisor, business partner, etc.)
Business Reference Name: _____ Relationship: _____
Phone: _____ Email: _____

How did you learn about InspireHealth?

What is your **main motivation(s)** for volunteering with our organization?

Please share your understanding of a **healing environment**?



Most volunteer shifts take place M-F 9am-5pm, with special events taking place on weekends.
Using the chart below, please indicate your **general availability** to volunteer:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

What is your intended **length of volunteer commitment**: _____

Please indicate any specific details regarding **your availability** (school, work, etc.)

Please indicate the **general area(s)** where you would like to volunteer (if selecting more than one area, please number your choices etc.)

- | | |
|---|---|
| <input type="checkbox"/> Administrative / Reception | <input type="checkbox"/> Event Coordination |
| <input type="checkbox"/> Art Therapy | <input type="checkbox"/> Exercise Therapy Classes (Kinesiology) |
| <input type="checkbox"/> Counseling | <input type="checkbox"/> Translation |
| <input type="checkbox"/> Marketing / Fundraising | <input type="checkbox"/> Hosting (events, workshops, programs) |
| <input type="checkbox"/> Food prep / cooking | <input type="checkbox"/> General Support (as needed) |
| <input type="checkbox"/> Cooking Classes | <input type="checkbox"/> Yoga teacher (Include copy of certification and insurance) |
| <input type="checkbox"/> Community Relations | |

Please list any other **relevant skills or certification** you feel might be of services (eg. licensed health care professional, etc.)

Can we put you on our **“On Call”** list with last minute volunteer positions to fill? Yes No

InspireHealth Confidentiality Agreement

This is to certify that I, _____, an employee, student, volunteer, or Board member of InspireHealth, understand that any information (written, verbal, or other form) obtained during the performance of my duties must remain confidential. This includes all information about members, clients, families, employees, and other associate organizations, as well as any other information otherwise marked or known to be confidential.

I understand that any unauthorized release or carelessness in handling of this confidential information is considered a breach of the duty to maintain confidentiality.

I further understand that any breach of the duty to maintain confidentiality could be grounds for immediate dismissal and/or possible liability in any legal action arising from such breach.

Signature: _____

Date signed: _____



InspireHealth Community Cultural Agreement

As a community, we value the following as it supports the creation of a congruent and inspiring healing environment:

Self-responsibility

- To take responsibility for my thoughts, feelings, behaviors and choices
- To manage my experience appropriately without negatively impacting others
- To be responsible for creating fulfillment in my work
- To take ownership of tasks
- To find creative solutions to problems
- To be aware of and curious about my projections onto others
- Not to complain
- Not to make excuses or blame others for my behavior

Teamwork

- To work collaboratively
- To support myself and others in healthy, positive ways
- To support my own and my colleague's strengths
- To contribute to the greatest and highest good of InspireHealth
- To be open to ideas, opinions, perceptions and beliefs of other team members
- To support leadership decisions
- To create a nurturing and empowering environment

Open Communication

- Not to gossip
- Not to engage in office politics
- To remind myself and my colleagues of this agreement
- To resolve issues as they arise
- To discuss difficult issues directly with the person involved
- To seek to understand another colleague's point of view when addressing issues

Authenticity and Integrity

- To act congruently with my values and the values of this agreement
- To trust my authentic expression
- To develop empathic relationships, supporting growth, rather than sympathetic relationships, supporting and enabling unhealthy patterns.

Personal Growth

- To value health, learning, self-discovery and evolution on the levels of body, mind and spirit
- To develop and embody my strengths.
- To have a growing awareness of my limitations in order to gain new perspectives and empower myself to make new choices.

As part of the InspireHealth community, I, _____, agree to uphold these values.

