



## Lillooet Restorative Justice Program

### VOLUNTEER APPLICATION FORM Confidential Information

#### GENERAL INFORMATION

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Home Ph #: \_\_\_\_\_

Cell: \_\_\_\_\_ Email: \_\_\_\_\_

#### EMPLOYMENT INFORMATION

Are you currently:

Employed/self-employed  Student  Other

May we contact you at your place of employment? Yes  No

If yes, Work Ph #: \_\_\_\_\_ Work Email: \_\_\_\_\_

#### EDUCATION/TRAINING

Please list any relevant training including formal education and other volunteer training courses:

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**EXPERIENCE**

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Please list any relevant experience and indicate if it was employment or volunteer:

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**AREAS OF INTEREST**

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Please indicate all areas of interest:

Community Justice Forum (CJF) Facilitator  CJF Co-Facilitator

Mentor for youth completing agreements  Committee Member

CJF Training  Mentor Training  Other: \_\_\_\_\_

When are you available:

Morning  Afternoon  Evening  Weekends

Are there any specific times when you are not available to volunteer:

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How many hours per month would you be available to volunteer: \_\_\_\_\_

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**REFERENCE:**

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Please provide the name of one reference:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Ph #: \_\_\_\_\_ Work Ph #: \_\_\_\_\_

Email: \_\_\_\_\_

**Please read the following and sign the application below:**

A current Criminal Record Check is **required** in order to volunteer with the Lillooet Restorative Justice Program.

I hereby certify that all the information included in this application form is true to the best of my knowledge. I give permission for an authorized member of the Lillooet Restorative Justice Program to conduct reference checks with the above named reference and release the Lillooet Restorative Justice Society and all others from liability in connection with the same.

I understand that the information provided in this application will be kept confidential and only be used to assist in completing the volunteer screening process.

I acknowledge and accept that this application does not guarantee acceptance into the program, and that the Lillooet Restorative Justice Program is under no obligation to accept or assign me as a volunteer in their program at this time.

**Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

The Lillooet Restorative Justice Program reserves the right to screen and select appropriate volunteers based on our criteria and needs - thank you for your interest.

**Please mail or drop off your application along with a current Criminal Record Check.**