



[ASL Translation](#)

Volunteer Information Form

General Data (Required):

Name:

Address:

Phone Number:

Email:

Languages:

English

French

ASL

Other:

Emergency Contact Information:

Name:

Phone Number:

Have you previously volunteered or worked with APSEA?

Yes

No

If yes, what was the nature of the activity or position and the dates?

I am applying to volunteer for the following events or activities:

Background Checks

All volunteers must complete a Criminal Offence Declaration that is to be submitted to Human Resources on an annual basis. In addition, volunteers for medium- or high-risk settings/ situations will be required to obtain all appropriate background checks such as a Criminal Records Check with Vulnerable Sector Check. Examples of medium risk settings could be to volunteer for an extra-curricular club/activity, meeting with students in a room where the teacher does periodic checks on the activities of a group. Examples of high-risk settings could be to volunteer for an offsite field trip to a public library or post-secondary institution.

If required, are you willing to provide these documents?

Yes

No

If I take on the role of volunteer with APSEA, I will hold in confidence all information and material received from and about learners and/or personnel that may come to my attention in the course of my duties. Furthermore, I agree to return all personal/confidential information to APSEA for appropriate storage or disposal.

Volunteer's Signature:

Date:

APSEA Supervisor/Manager or Designate Signature:

Date:

Reviewed/Revised: December 2023