

**ST. VINCENT'S KITCHEN
VOLUNTEER APPLICATION FORM**

NAME:

ADDRESS:

PHONE (H) (B)

Can we give your number to a team co-ordinator? Yes No
 Would you give permission to have a Criminal Information Check done? Yes No

If there is a confidential issue to discuss, please contact the Administration Office. All information received will be kept strictly confidential.

Church Affiliate:

Age Group	Under 21	Student
	21 - 40	Retired
	41 - 60	Over 60

Jobs you are interested in doing:	Any Job		
	Maintenance	Food Preparation	Tea & Coffee
	Dishwasher (Machine)	Go for	Cook
	Steam Table	Bus Person	Driver
	Dish Dryer	Server	Supervisor
	Pots & Pans	Cleanup (5:30 - 7:45)	Co-ordinator
	Scraper	Store Worker (10 am - 4 pm weekdays)	

Times Available:	Monday	am	pm	Tuesday	am	pm
	Wednesday	am	pm	Thursday	am	pm
	Friday	am	pm	Saturday	am	pm

Previous Volunteer and Work Experience relevant to Volunteering at St. Vincent's Kitchen
 References:

Name	Name
Address	Address
Phone number	Phone number
Occupation	Occupation

Medical Problems you would like noted:

How did you hear about St. Vincent's Kitchen?

Date: Signature: _____

Received by: _____ (Supervisor) Comments: _____ _____ _____
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