

WHEELS FOR CHOICE VOLUNTEER APPLICATION

First Name:		Last Name:	
Phone Number (Cell):		Alternate Phone Number:	
Date of Birth (dd/mm/yyyy):		Email address:	
Address:			
City:		Prov:	Postal Code:
Driver's Licence Number:			Province where licence held:
Current Occupation:			
Have you volunteered as a driver before? Yes <input type="checkbox"/> No <input type="checkbox"/>		Name of organization:	
		Dates:	
Have you ever been convicted of a criminal offense for which you have not been pardoned? Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, please explain:	
Please describe related work/volunteer/education experience (please indicate if you have previous experience in the sexual health field):			
Why do you want to volunteer at SHORE Centre?			
What does pro-choice mean to you?			
Have you had a police check with vulnerable sector check within the past 12 months? (You will require one before you can work with us.) <input type="checkbox"/> Yes (please attach to application) <input type="checkbox"/> No			

Print name: _____

Signature: _____

Date: _____