



City of Belleville Recreation, Culture & Community Services Youth Volunteer Application

Description:

The City of Belleville has a youth volunteer program designed to give youth the opportunity to gain valuable leadership skills and experience, obtain community hours and become a voice for youth in the community.

There are several different positions available for volunteering:

- Youth Belleville Committee members - plan and help carry out programs, activities and special events for youth
- Youth Room Staff
- Skating Monitors
- Preschool/Children's Program Assistant
- Gym and Sports Program Assistant
- Aquatics

Qualifications:

- Must be between the ages of 14-19 (Grade 9-12)
- Students 18 years and older will need to have a recent police check done (6 months or newer) before volunteering can begin. Students 14-17 years will not need a police check done prior to volunteering
- Creative, personable and passionate about making a difference
- Able to work independently and in teams
- Comfortable speaking to peers and to the public
- Reliable and dependable

Flexible hours are required, including after school, evenings and weekends.

Please complete the application form and return to Nikki De Haan at the Customer Service Desk or by email, fax, or mail.

Nikki De Haan
Youth Programmer
City of Belleville
Recreation, Culture & Community Services
265 Cannifton Road, Belleville, ON K8N 4V8
Youth Room Telephone: 613-967-3200 Ext. 3837
Fax: 613-967-3207
TTY: 613-771-9781
Email: ndehaan@city.belleville.on.ca

Application

The City of Belleville is an Equal Opportunity Employer and supports the spirit and intent of the Ontario Human Rights Code.



City of Belleville
 Recreation, Culture &
 Community Services Department
 265 Cannifton Road
 Belleville, Ontario K8N 4V8
 Phone: 613-966-4632
 Fax: 613-967-3207

The information collected on this form is collected in accordance with the Personal Information Protection and Electronic Act (PIPEDA) and the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA). This information will be used for employment purposes only.

Please print all information.

YOUTH VOLUNTEER POSITION APPLICATION

NAME: _____

ADDRESS: _____

TELEPHONE NO: (____) _____ CELL NO: (____) _____

EMAIL: _____

Have you ever previously been employed by the City of Belleville, if "yes," state when and for what Department: _____

AREAS OF INTEREST: (Please Circle Yes or No)

- Youth Belleville Committee member **YES NO**
- Children's Programs **YES NO**
- Youth Room Staff **YES NO**
- Skating Monitors **YES NO**
- Gymnasium Programs **YES NO**
- Aquatics **YES NO**

AVAILABLE TIMES: Sunday Monday Tuesday Wednesday Thursday Friday Saturday

(Please circle days you are available to volunteer and write times on line)

EDUCATION	High School	8	9	10	11	12	(Please circle the <u>last grade you completed</u>)	Graduated	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Secondary School	Name of School		Program			Completed			
	College/University									
	Are you a full time student? <input type="checkbox"/> Yes <input type="checkbox"/> No Do you plan to return to school next term? <input type="checkbox"/> Yes <input type="checkbox"/> No Date: _____									

Can you make a six month commitment to this program? **Yes:** _____ **No:** _____

VOLUNTEER EXPERIENCE (if applicable):

1. Organization: _____

Date: From _____ to _____

Duties: _____

2. Organization: _____

Date: From _____ to _____

Duties: _____

EMPLOYMENT EXPERIENCE (if applicable):

1. Employer: _____
Date: From _____ to _____
Duties: _____

2. Employer: _____
Date: From _____ to _____
Duties: _____

PLEASE DESCRIBE EXPERIENCE AND QUALIFICATIONS IN THE AREAS LISTED BELOW:

A/ Experience Working With People: _____

B/ Interests, Hobbies, Crafts: _____

C/ Involvement in Sports/Fitness Training:

I give permission to give my contact information to other youth volunteers to contact me if necessary to find somebody to fill a shift if needed. YES NO

REFERENCES

1. Name: _____ Relation _____ Phone # _____
2. Name: _____ Relation _____ Phone # _____
3. Name: _____ Relation _____ Phone # _____

I hereby certify that the facts set forth in this application are true and complete to the best of my knowledge. I sign below giving the City of Belleville permission to verify all of the above information.
I understand that if I falsified statements on this application it will be considered cause for dismissal from the position.

Signature of Applicant

Date