

Volunteer Application

Name:
Home Address:

Date of Application:

Phone Home:
Phone Work:
Phone Mobile:

VOLUNTEER TEAMS

The Events Centre needs help from our local community on occasions and have developed two special interest teams that assist at the centre.

School Holiday Programme This involves assisting workshop facilitators (workshop facilitators run workshops on a huge range of activities) being alongside children participating in the workshops and the programme runs 3 times a year for one week of the school holidays with the hours being school hours ie 9am until 3pm. There are often options to volunteer for mornings or afternoons only.

Library Programmes: Quintin Pope organizes the school holiday programmes during the year which involve reading programmes where volunteers listen to children reviewing their books, assisting with craft activities and finales or other events with entertainers on site.

Please indicate the team/s you would like to be included in by ticking the box. You may choose both options.

SCHOOL HOLIDAY PROGRAMMES

LIBRARY PROGRAMMES

During the school holiday programme if you are on site the entire day, lunch is provided. As a volunteer you are not required to 'run' a workshop or programme (unless you are particularly interested in doing so) you are there to support the facilitator.

If you have any other queries around the volunteering then email me on the details below:

cheryl@cdc.govt.nz and we will get back to you as soon as possible.

Please also attach a current curriculum vitae or indicate what experience you have that would be helpful in these roles.

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Privacy Act Declaration

I acknowledge that Carterton District Council needs to collect personal information about me for the purpose of effectively managing and utilizing me as an Information Centre Volunteer. This information will be used for this purpose only and can be viewed by me at any time for review or alteration. Carterton District Council will not pass on my confidential information to any other party without my prior consent. I acknowledge that signing this form confirms my consent to the use of my information for the above purpose.

Signed:

Dated:

Referees

Names and contact details of two referees who are not family members:

Referee 1

Name:	
Phone:	Email:

Referee 2

Name:	
Phone:	Email:

Thank you for completing this form.

Please return the form to the Information Centre and we will be in contact shortly to arrange an informal interview. We are thrilled that you have chosen to volunteer your valuable time, energy and talents to the Information Centre. Thank you!