

SCOTTISH RITE CHARITABLE FOUNDATION
LEARNING CENTRE HAMILTON

Name: _____ Date: _____

Home Address: _____

City: _____ Province: _____ Postal Code: _____

Telephone: Home: (____) _____ Work: (____) _____ Cell: (____) _____

E-Mail: _____

Type of Volunteer work in which you are most interested:

- Organizing/Planning
- Special Projects
- Receptionist/Filing
- Writing/Editing
- Other _____
- Committee Work
- Typing/Keyboarding
- Computer/Data Entry
- Security
- Fund Raising
- Answering Phones
- Art/Graphics
- Promotion

Day and Times Available:

- | | | | | | |
|---------|-------------------------------|-------------------------------|-----------|-------------------------------|-------------------------------|
| Monday | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. | Wednesday | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. |
| Tuesday | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. | Thursday | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. |
| Friday | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. | Saturday | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. |

Type of Commitment you wish to make:

- Ongoing
- On Call (Special Projects)
- Short Term
- Recurring days or hours (explain) _____
- Other _____

Pertinent Educational or Volunteer Experience:

This application is to be submitted to the Centre Director, and will be treated as confidential.