



Central Alberta Youth Unlimited / YFC

Central Office: 5025 50 St Lacombe, AB T4L 1X9
Phone: 403-789-CAYU (2298)
Email: info@cayu.ca
Web: www.cayu.ca

Level One Volunteer Application Form

The information you provide on this form will help us find the most satisfying and appropriate volunteer placement for you. Please provide as much detail as possible.

PERSONAL

Name: _____
Address: _____ City: _____ PC: _____
Home Phone: _____ Cell Phone: _____
E-mail: _____ Preferred Method of Communication: _____
Emergency Contact Name & Phone #: _____

I am over 18 years of age (If you are under 18 years of age, you are still able to volunteer)

EXPERIENCE

Do you have any volunteer experience? YES NO

If yes, please provide information regarding this experience.

Please indicate your community of interest:

Lacombe Ponoka Rimbey Red Deer Maskwacis

Please indicate your area(s) of interest:

Fundraising Special Events Maintenance/ Special Projects
 Other: _____

HOBBIES & INTERESTS

Please describe your hobbies and interests.



Central Alberta Youth Unlimited / YFC

Central Office: 5025 50 St Lacombe, AB T4L 1X9
Phone: 403-789-CAYU (2298)
Email: info@cayu.ca
Web: www.cayu.ca

SPECIAL SKILLS / TRAINING

Please describe any special skills you possess or any specific training you may have.

Do you have experience working with youth? YES NO

If yes, please provide information.

TIME AVAILABLE FOR VOLUNTEER INVOLVEMENT

Please provide the times that you are able to volunteer:

Mornings Afternoon Evenings Weekends

Comments: _____

OTHER INFORMATION

Name of Church, if attending: _____

Why do you desire to be a part of the CAYU Volunteer Team? _____



Central Alberta Youth Unlimited / YFC

Central Office: 5025 50 St Lacombe, AB T4L 1X9
Phone: 403-789-CAYU (2298)
Email: info@cayu.ca
Web: www.cayu.ca

REFERENCES

Please provide three references:

1. Name: _____

Relationship (friend, employer, etc.): _____

Home Phone #: _____ Email: _____

2. Name: _____

Relationship (friend, employer, etc.): _____

Home Phone #: _____ Email: _____

3. Name: _____

Relationship (friend, employer, etc.): _____

Home Phone #: _____ Email: _____

This application form and the information contained therein are being provided in confidence and shall not be disclosed to any person other than Central Alberta Youth Unlimited. I, the undersigned declare that all information given is true, and understand that willfully providing false information will result in dismissal from potential volunteer work with Central Alberta Youth Unlimited/YFC.

Signature: _____ Date: _____



Central Alberta Youth Unlimited / YFC

Central Office: 5025 50 St Lacombe, AB T4L 1X9
Phone: 403-789-CAYU (2298)
Email: info@cayu.ca
Web: www.cayu.ca

Please note: All volunteers who will be in contact with youth or other vulnerable persons will be required to submit a Criminal Record Check.

FOIPP Consent Form

Due to the freedom of Information and Protection of Privacy Act (FOIPP), Central Alberta Youth Unlimited / YFC (CAYU) requires written permission for the following:

- To release your name and telephone number to CAYU volunteers for the purpose of contacting you about volunteer requirements, special events, evaluations, service delivery surveys, and/or meetings.
- To use your photos and/or name to promote and advertise CAYU programs and services. (Eg. displays, web site, media articles or pictures and/ or static display boards.)

I, _____, hereby give my permission to Central Alberta Youth Unlimited to release my personal information for the purposes listed above.

Signature _____ Date _____

Witness _____ Date _____

Getting Connected

Please add me to the Mailing List so that I can receive quarterly newsletters via email or mail (circle one).

Please add me to the email contact list so that I can receive short, monthly, e-news updates.

I would like to know more about how to financially partner with Central Alberta Youth Unlimited and/or one of their staff members.



Central Alberta Youth Unlimited / YFC

Central Office: 5025 50 St Lacombe, AB T4L 1X9
Phone: 403-789-CAYU (2298)
Email: info@cayu.ca
Web: www.cayu.ca

Oath of Confidentiality

I will respect the rights of youth, staff and volunteers to total privacy concerning the details of their lives, such as names, addresses, background, family relationships and any other personal information.

I agree to limit my discussion to the specific duties and responsibilities as outlined in my job description. Specifically, I can discuss what I do, but will not share information that may identify any individual associated with Central Alberta Youth Unlimited / YFC.

I agree to keep all information about the youth confidential and will share this information with my co-workers on a need to know basis.

I understand that I am required to inform my supervisor of any incidents that may occur within my duties at Central Alberta Youth Unlimited / YFC and that the passing of this information to my supervisor is classified as a "need to know" basis and does not breach this Oath of Confidentiality.

I understand that as a condition of my involvement with Central Alberta Youth Unlimited / YFC, that I am expected to maintain confidentiality. Any breach of confidentiality will result in disciplinary measures, which could include dismissal.

I understand and agree that this oath of confidentiality will remain in effect even if I cease to be involved with Central Alberta Youth Unlimited / YFC.

Signature _____ Date _____

Witness _____ Date _____



Central Alberta Youth Unlimited / YFC

Central Office: 5025 50 St Lacombe, AB T4L 1X9

Phone: 403-789-CAYU (2298)

Email: info@cayu.ca

Web: www.cayu.ca

Statement of Faith

1. We believe the Bible to be the inspired and only infallible authoritative Word of God.
2. We believe that there is one God eternally existent in three persons: Father, Son and the Holy Spirit.
3. We believe in the deity of our Lord Jesus Christ, in His virgin birth, in His sinless life, in His miracles, in His vicarious and atoning death through His shed blood, in His bodily resurrection, in His ascension to the right hand of the Father, and in His personal return in power and glory.
4. We believe that for the salvation of lost and sinful man, regeneration by the Holy Spirit is absolutely essential.
5. We believe in the present ministry of the Holy Spirit by whose indwelling the Christian is enabled to live a godly life.
6. We believe in the resurrection of both the saved and the lost; that they are saved unto the resurrection of life and they that are lost unto the resurrection of damnation.
7. We believe in the spiritual unity of believers in Christ.

I have read the above statement, and while volunteering and representing Central Alberta Youth Unlimited/ YFC, will conduct myself in a manner that is not contradictory to these beliefs.

Yes

No

Name: _____

Signature: _____

Date: _____



Central Alberta Youth Unlimited / YFC

Central Office: 5025 50 St Lacombe, AB T4L 1X9
Phone: 403-789-CAYU (2298)
Email: info@cayu.ca
Web: www.cayu.ca

Level 1

CONFIDENTIAL REFERENCE FORM

Applicant Name: _____

TO BE COMPLETED BY REFERENCE:

Please complete and return to Central Alberta Youth Unlimited by mail to 5025-50 Street, Lacombe, AB T4L 1X9, or by e-mail to info@cayu.ca. **Do not return to applicant.**

	Superior	Above Average	Average	Below Average	No Basis for Judgment	Comments (Additional Space Below)
Kindness & generosity						
Moral integrity						
Perseverance						
Self-discipline						
Leadership potential						
Plan & goal oriented						
Punctuality						
Self- initiative						
Wise use of time						
Working with others/ teamwork						
Teachable servant spirit						
Able to adjust to change						
Able to work through problems						
Able to handle confrontation productively						
Reputation in community						

How long, and in what capacity have you known the applicant?

What do you consider to be the applicant's greatest strengths?



Central Alberta Youth Unlimited / YFC

Central Office: 5025 50 St Lacombe, AB T4L 1X9
Phone: 403-789-CAYU (2298)
Email: info@cayu.ca
Web: www.cayu.ca

What areas of the applicant's life would you say need growth?

Would you recommend this applicant for a volunteer position?

- | | | |
|---|---|--|
| <input type="checkbox"/> Enthusiastically | <input type="checkbox"/> Fairly Strong | <input type="checkbox"/> With Reluctance |
| <input type="checkbox"/> Strongly | <input type="checkbox"/> Without Enthusiasm | <input type="checkbox"/> Don't Recommend |

Is there anything else you feel would be valuable for us to know in relation to this applicant's ability to serve alongside the Central Alberta Youth Unlimited Team?

May we contact you if we have any further questions? Yes No

Preferred contact: Email Home Phone Cell Phone

Signature: _____ Date: _____

Name: _____ Position: _____

Home Phone: _____ Cell Phone: _____

Mailing Address: _____

Email Address: _____



Central Alberta Youth Unlimited / YFC

Level 1

Central Office: 5025 50 St Lacombe, AB T4L 1X9
 Phone: 403-789-CAYU (2298)
 Email: info@cayu.ca
 Web: www.cayu.ca

CONFIDENTIAL REFERENCE FORM

Applicant Name: _____

TO BE COMPLETED BY REFERENCE:

Please complete and return to Central Alberta Youth Unlimited by mail to 5025-50 Street, Lacombe, AB T4L 1X9, or by e-mail to info@cayu.ca. **Do not return to applicant.**

	Superior	Above Average	Average	Below Average	No Basis for Judgment	Comments (Additional Space Below)
Kindness & generosity						
Moral integrity						
Perseverance						
Self-discipline						
Leadership potential						
Plan & goal oriented						
Punctuality						
Self- initiative						
Wise use of time						
Working with others/ teamwork						
Teachable servant spirit						
Able to adjust to change						
Able to work through problems						
Able to handle confrontation productively						
Reputation in community						

How long, and in what capacity have you known the applicant?

What do you consider to be the applicant's greatest strengths?

What areas of the applicant's life would you say need growth?



Central Alberta Youth Unlimited / YFC

Central Office: 5025 50 St Lacombe, AB T4L 1X9
Phone: 403-789-CAYU (2298)
Email: info@cayu.ca
Web: www.cayu.ca

Would you recommend this applicant for a volunteer position?

- | | | |
|---|---|--|
| <input type="checkbox"/> Enthusiastically | <input type="checkbox"/> Fairly Strong | <input type="checkbox"/> With Reluctance |
| <input type="checkbox"/> Strongly | <input type="checkbox"/> Without Enthusiasm | <input type="checkbox"/> Don't Recommend |

Is there anything else you feel would be valuable for us to know in relation to this applicant's ability to serve alongside the Central Alberta Youth Unlimited Team?

May we contact you if we have any further questions? Yes No

Preferred contact: Email Home Phone Cell Phone

Signature: _____ Date: _____

Name: _____ Position: _____

Home Phone: _____ Cell Phone: _____

Mailing Address: _____

Email Address: _____



Central Alberta Youth Unlimited / YFC

Level 1

Central Office: 5025 50 St Lacombe, AB T4L 1X9
 Phone: 403-789-CAYU (2298)
 Email: info@cayu.ca
 Web: www.cayu.ca

CONFIDENTIAL REFERENCE FORM

Applicant Name: _____

TO BE COMPLETED BY REFERENCE:

Please complete and return to Central Alberta Youth Unlimited by mail to 5025-50 Street, Lacombe, AB T4L 1X9, or by e-mail to info@cayu.ca. **Do not return to applicant.**

	Superior	Above Average	Average	Below Average	No Basis for Judgment	Comments (Additional Space Below)
Kindness & generosity						
Moral integrity						
Perseverance						
Self-discipline						
Leadership potential						
Plan & goal oriented						
Punctuality						
Self- initiative						
Wise use of time						
Working with others/ teamwork						
Teachable servant spirit						
Able to adjust to change						
Able to work through problems						
Able to handle confrontation productively						
Reputation in community						

How long, and in what capacity have you known the applicant?

What do you consider to be the applicant's greatest strengths?

What areas of the applicant's life would you say need growth?



Central Alberta Youth Unlimited / YFC

Central Office: 5025 50 St Lacombe, AB T4L 1X9
Phone: 403-789-CAYU (2298)
Email: info@cayu.ca
Web: www.cayu.ca

Would you recommend this applicant for a volunteer position?

- | | | |
|---|---|--|
| <input type="checkbox"/> Enthusiastically | <input type="checkbox"/> Fairly Strong | <input type="checkbox"/> With Reluctance |
| <input type="checkbox"/> Strongly | <input type="checkbox"/> Without Enthusiasm | <input type="checkbox"/> Don't Recommend |

Is there anything else you feel would be valuable for us to know in relation to this applicant's ability to serve alongside the Central Alberta Youth Unlimited Team?

May we contact you if we have any further questions? Yes No

Preferred contact: Email Home Phone Cell Phone

Signature: _____ Date: _____

Name: _____ Position: _____

Home Phone: _____ Cell Phone: _____

Mailing Address: _____

Email Address: _____