



# ICAN Seniors Association Volunteer Application Form

## 义工申请表

Last Name 姓: \_\_\_\_\_ First Name 名: \_\_\_\_\_

Date of Birth 出生日期: \_\_\_\_\_ (dd/mm/yy 日/月/年)

Status of Residency in Canada 加国身份: (Please "✓" the box below 请在相应处打 ✓)

☐ Permanent Resident 永久居民    ☐ Citizen 公民    ☐ Visitor 探亲/旅游    ☐ Student 学生

☐ Work Permit 工签    ☐ Refugee 难民    ☐ Other (please specify) 其它请注释: \_\_\_\_\_

Address 地址: \_\_\_\_\_ Postal Code 邮编: \_\_\_\_\_

Telephone (Home) 住宅电话: \_\_\_\_\_ (Cell) 手机: \_\_\_\_\_

Email address 邮箱: \_\_\_\_\_

Language(s) 会讲语言: \_\_\_\_\_ (Please specify)

How did you hear about our organization 如何知道我们: (Please "✓" the box below)

☐ Social media 社交媒体    ☐ Friend(s) 朋友介绍

☐ Others (please specify) 其它请注明: \_\_\_\_\_

Volunteer/Working Experience/Skills 请简单列出你过往的义工或者工作经验和技能:

(Please list your previous volunteer experience. If you do not have any volunteer experience, state your working experience.)

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Available Time 能做义工的时间 (选出星期几注明几点到几点 select day and time)

☐ Monday

☐ Tuesday

☐ Wednesday

☐ Thursday

☐ Friday

☐ Saturday

☐ Sunday

References 推荐人:

1. Name 姓名: \_\_\_\_\_ Phone/email 电话/邮箱: \_\_\_\_\_

2. Name 姓名: \_\_\_\_\_ Phone/email 电话/邮箱: \_\_\_\_\_

Emergency Contact Person Information 紧急联络人:

Name 姓名: \_\_\_\_\_ Relationship 关系: \_\_\_\_\_ Contact No. 电话: \_\_\_\_\_

Applicant Signature 签名: \_\_\_\_\_ Date of Application 日期: (dd/mm/yy 日/月/年)