



**HOW DID YOU HEAR ABOUT US?**

How did you hear about our program? (friend, volunteer fair, website, social media, etc.)

**RELEVANT INTERESTS, ABILITIES AND WORK/VOLUNTEER EXPERIENCE**

Why are you interested in volunteering with Pathways to Education Spryfield?

Please indicate any experience you have working with youth and young adults.

What experience you have working in an educational or community development setting?

Do you have any special skills, abilities or certifications that you would like to share? A second language, First Aid Training, music, art, sports, resume writing, budgeting, cooking or other.

What subjects do you feel comfortable tutoring? Math, Science, Physics, French, Other?

*A Program of:*



**531 Herring Cove Road, Halifax, NS B3R 1X3**

**PHONE:** (902) 477-0964 ext 29

**FAX:** (902) 477-8984

**EMAIL:** [volunteer@chebuctoconnections.ca](mailto:volunteer@chebuctoconnections.ca)

**AVAILABILITY**

**Volunteer Position Sought:**

Volunteer Tutor/Mentor (Grades 10-12) **\*\*See Programming Schedule (below)**

Volunteer Tutor/Mentor (Grade 9 Night) **\*\*See Programming Schedule (below)**

English as an Additional Language (EAL) Volunteer Tutor/Mentor

Healthy Snack Volunteer **\*\*Generally a 3pm start time.**

Are you interested in volunteering for special events throughout the year? Example: fundraisers, workshops, graduation, field trips and excursions.

Yes                      No

**TUTOR/MENTOR SCHEDULE 2017-18**

We would like to accommodate your preference as best we can. At this time, is there a preferred time/day that you would like to volunteer as a tutor/mentor?  
(Please note, sessions that are shaded-in are currently full)

	<b>Monday</b> Academic Support (Grades 10-12)	<b>Tuesday</b> Academic Support (Grade 9's ONLY)	<b>Wednesday</b> Academic Support (Grades 10-12)	<b>Thursday</b> Academic Support (Grades 10-12)
<b>3:30-4:30</b>				
<b>4:45-5:45</b>				
<b>6:00-7:00</b>				

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**REFERENCES (No Relatives or Friends)**

Please list two professional references (include your current or past employer) who know you well and can attest to your character, skills, and dependability. References must have known you for a minimum of 6 months.

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Title:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**PLEASE READ THE FOLLOWING CAREFULLY BEFORE SIGNING THIS APPLICATION:**

- I understand that there may not be a suitable volunteer role available at this time and that my information will be kept on file for future opportunities.
- I understand that this is an application for volunteering and not a commitment or promise of employment.
- I authorize Chebucto Connections, Pathways to Education Spryfield, to contact the references I have provided (above) as part of the screening process for volunteers and record information from this application into a volunteer management database.
- I agree to complete a Criminal Record Declaration prior to participation in the Pathways to Education after school program.
- I certify that the information provided to Chebucto Connections and Spryfield Pathways to Education is true, correct and complete to the best of my knowledge. I understand that the information contained on my application will be verified by the organization and that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position or my termination as a volunteer.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**You will be contacted for an interview once this application form is reviewed.**

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