

# Gateway Regional Victim Services

**Gateway Regional Victim Services: 150 15<sup>th</sup> Street NW Prince Albert, SK S6V 2A4**  
**Phone:(306)765-5574 Fax:(306)765-5503 Email:gatewayregional@outlook.com**

## Volunteer Application

Today's Date: \_\_\_\_\_

### Personal Information

Name: \_\_\_\_\_ Birthdate: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Ph: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Ph: \_\_\_\_\_

Why are you interested in volunteering?

- Personal Interest  
 Work Experience  
 Community Involvement  
 Other \_\_\_\_\_

Have you ever worked, or do you currently work for Saskatchewan Victim Services or RCMP?

Yes  No

Have you ever received services from Saskatchewan Victim Services?

Yes  No

Do you have a valid driver's license?

Yes  No

Do you have a car available for use while volunteering?

Yes  No

If so, do you have or would you be willing to acquire \$2 Million Liability on your package policy?

Yes  No

Gateway Regional Victim Services  
Carol Wittal - Coordinator  
Phone: (306)765-5574 Fax: (306)765-5503  
150 15<sup>th</sup> Street NW Prince Albert, SK S6V 2A4  
Email: gatewayregional@outlook.com

## Experience and Education

What is your educational/training background?

What is your employment history?

Have you had any previous experience as a volunteer? If so, with what organizations, and what kind of work did you do?

## Your Interests at Gateway Regional Victim Services (GRVS)

How did you learn about GRVS?

- Ad
- Friend/Family member
- College/University
- RCMP/Police
- Current Volunteer
- Other: *Please specify* \_\_\_\_\_

Which opportunities do you wish to explore further:

- Volunteer Victim Support Worker (40hrs of training provided and required)
- GRVS Volunteer at Community Events
- Volunteer specific skills/services (ie. Website design): \_\_\_\_\_
- Other \_\_\_\_\_

How long can you commit to volunteering?

- One time
- Occasionally
- One year or more
- Other \_\_\_\_\_

What days are you available?

- Mondays
- Tuesdays
- Wednesdays
- Thursdays
- Fridays
- Saturdays
- Sundays

What times are you available?

- Mornings
- Afternoons
- Evenings

Are you available for **on-call shifts** as emergencies arise in your community?

- Yes  No

Do you prefer to work (check all that apply)

- Directly with people served
- Behind the scenes: Computers/Filing
- Fundraising/Event Planning
- No preference

Volunteer Support Workers with GRVS require **40 hours** of training (likely to take place on evenings/weekends). Job shadowing and support are available to all volunteers. Are you able to make yourself available for this training?  Yes  No

Other languages you speak \_\_\_\_\_  Basic  Conversational  Fluent  
\_\_\_\_\_  Basic  Conversational  Fluent

Do you have any special needs or restrictions we should be aware of?:

Date you can begin service:

### **Criminal Record**

All volunteer positions require a Criminal Record check. Conviction will not necessarily disqualify you from participating. Have you ever been convicted of a felony?  Yes  No  
If yes, explain.

**Please note: Working with GRVS as a Volunteer Victim Support Worker requires that you pass an RCMP Security Clearance. This involves a thorough background check and can take 6 months or more to obtain.**

**Please describe in 3-5 sentences why you want to be a volunteer at Gateway Regional Victim Services.**  
*Why, at this particular time in your life have you chosen to volunteer with us? What do you hope to gain from being a volunteer?*

**Please provide 3 references (including two past employment references) that we can contact to determine your suitability to the program:**

1:

2:

3:

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**Gateway Regional Victim Services** considers applicants for volunteering without regard to sex, race, age, religion, national origin, veteran or marital status, or any other legally protected status. We provide reasonable accommodation to qualified individuals with disabilities when it would not be an undue hardship. If you need a reasonable accommodation in the pre-placement process, please contact the Coordinator, Carol Wittal, at 306-765-5574.

**AUTHORIZATION AND AGREEMENT BY APPLICANT**

1. I certify that the facts set for in this volunteer application are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in my application or placement interview may result in the rejection of my application or discharge from the volunteer program.
2. I understand that if I am charged with or involved in any criminal activity or offense while volunteering for Gateway Regional Victim Services, I must notify the Coordinator right away.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**Please complete and submit to Carol Wittal, Coordinator for Gateway Regional Victim Services:**

**Email:** [gatewayregional@outlook.com](mailto:gatewayregional@outlook.com)

**Mail:** 150 15th Street NW Prince Albert, SK S6V 2A4

**Fax:** (306) 765-5503

**Phone:** (306) 765-5574

*Thank you for your interest in this unique volunteer opportunity with  
Gateway Regional Victim Services Inc.*

**Gateway Regional Victim Services**  
Carol Wittal - Coordinator  
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