***THE INDIGENOUS SUPPORT PROJECT – VOLUNTEER REQUEST FORM***

***Thank you for your interest in volunteering with The Indigenous Support Project! After you have completed this form, please send it to*** ***general@tisp.org*** ***and we will review it. We will be contacting you within 3 business days of the date this form is received.***

**SECTION I**

Name:

Date:

Email:

Cell Phone:

**SECTION II**

Relevant Experience:

Relevant Qualifications: (CPR, First Aid etc.):

Why do you want to volunteer with us?

**SECTION III:**

Please check all that apply:

I am available on Mondays Tuesdays Wednesdays

 Thursdays Fridays Saturdays

SECTION IV

1. Have you ever been charged AND/OR convicted of a crime involving vulnerable populations? (e.g. Children, people with mental health illnesses, people with addictions)

YES NO

1. If you have answered YES, please elaborate:
2. Have you ever been denied participation in any volunteer organizations that work with vulnerable populations?

YES NO

1. If you have answered YES, please elaborate:
2. Please add any other information you would like us to know: