**Nelson and District Women’s Centre Volunteer Intake Form**

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

**Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Preferred method of contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Areas of Interest/Skill:**

**\_\_ Drop In (Tuesday, Wednesday Thursday 12-4)**

**\_\_ Free Store organizing/donation sorting (2 hours a week)**

**\_\_ Garden Love**

**\_\_ Snow Shoveling in winter (before drop in T,W, Th, at 11 am)**

**\_\_ Maintenance**

**\_\_ Teaching/courses/service**

**\_\_ one on one peer counselling (set hours each week for a period of time)**

**\_\_ graphic and web design**

**\_\_ events (planning, preparation, clean up, postering)**

**\_\_ grant writing**

**Which Skills are you most interested in learning/developing?**

**Availability**

**Which days/times are you available and excited to volunteer?**

**What are your strengths? What do you want to offer?**

**Have you Volunteered with other organizations? If yes , which ones?**

**Are you interested in the Women’s Centre Volunteer Training- Rooted In Commmunity?**

**This training happens 3 times a year and is a great way to understand more about the services offered in this community and how the Women’s Centre fits in. There is also a personal development component where we learn and strengthen peer counselling skills and awareness of pertinent topics.**

**All volunteers who want to be in the Drop In as well as do Peer Counseling must take the RIC training as well as get a free criminal records check.**