



“Shalem, meaning wholeness, was formed with the mission and communal desire to provide a Christian setting that enhances the well-being of seniors.”

Volunteer Application Form

Shalem encourages the participation of volunteers who support our mission. If you agree with our mission as well as policies & procedures, we encourage you to complete this application.

The information on this form will help us find the most satisfying and appropriate volunteer opportunity for you.

The information you provide will be kept confidential and will not be shared with any outside organizations or institutions.

Date: _____

Name		
Street Address		
City	Province	Postal Code
Phone	Cell	E-mail
<p>How did you hear about Shalem Senior Community?</p> <p>Friend _____ Relative _____ Ad posting _____</p> <p>Other _____ Social Media _____</p> <p>Do you have any physical limitations we should be aware of? If so, please explain</p> <p>_____</p> <p>_____</p>		
<p>Person to notify in case of an emergency _____</p>		

Volunteer Experience		
Year(s)	Group	Position
_____	_____	_____
_____	_____	_____
_____	_____	_____

References		
Name	Occupation	Phone number
_____	_____	_____
_____	_____	_____

Availability						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning	Morning	Morning	Morning	Morning	Morning	Morning
Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon
Evening	Evening	Evening	Evening	Evening	Evening	Evening

Please circle all the categories you would be interested in pursuing as a volunteer:

Socials

Outings

Escorts on Trips

Exercise classes

Host/Hostess for Special Events

Reading to Seniors

Birthday Party Celebrations

Fix-It Projects

Entertainment

Games/Activities

Bible Devotions /Studies

Library Help

Brain Teasers

Pamper and Polish (painting nails)

Visiting

Playing Music

Arts N'Crafts

Organize Leisure Spaces

Building & Grounds

Shalem Café

Pool/Snooker Games

Other _____



DECLARATION OF CONFIDENTIALITY

I promise to maintain confidentiality with respect to information regarding all seniors or employees of Shalem.

I understand disclosure on my part of any such privileged information may be cause for the removal of my status as an approved volunteer at Shalem.

IN WITNESS WHEREOF this _____ day of _____, 20____, I hereby acknowledge that I have read, understand and accept the above responsibility as a Shalem Volunteer.

Signature: _____

Date: _____

WITNESS

Name: (please print) _____

Signature _____

Date: _____

ACCEPTANCE OF POLICES & PROCEDURES

(Shalem's Policies & Procedures can be read on-line at www.shalem.ca/Life at Shalem/Volunteering/Policies & Procedures. A hard-copy is also available at the Haven Reception Desk)

As a volunteer of Shalem, I have read and agree to abide by the policies & procedures of Shalem.

I understand that I will be volunteering at my own risk and that the organization, its employees and affiliates, can't assume any responsibility for any liability for any accident, injury or health problem which may arise from any volunteer work I perform for Shalem.

I agree all the work I do is on an unpaid volunteer basis.

I agree to get a Police Criminal Check, and a Vulnerable Persons Check before doing volunteer activities on a regular basis.

Signature _____

Date: _____

PIPEDA/FOIP

PIPEDA - Personal Information Protection & Electronic Documents Act

FOIPP - Freedom of Information & Protection of Privacy

As a volunteer for Shalem Society for Senior Citizens Care, we collect information about each volunteer on file in paper form and in a computer database.

Please read the following carefully. It outlines the type of information we will collect and its purpose:

- **Personal Information:** Name, address, phone number, email if available, other contact information
- **Date of Birth**
- **Skills or Training**
- **References**
- **Security and Vulnerable Persons Clearances**
- **Driver's Abstract** -as may be required for volunteer position
- **Statistical Information-** to track volunteer time

Information collected by Shalem Society for Senior Citizens Care is for contact use with the community and for tracking volunteer hours, membership, and program participation. Except as may be required by law, the information will not be shared outside the organization without the permission of the individual.

Freedom of Information and Protection of Privacy Act Consent & Notification

The Alberta Freedom of Information and Protection of Privacy Act (FOIP), came into effect October 1, 1999 for all Alberta local public bodies, requiring informed consent be obtained for the collection and use of personal information. The federal government also brought in a duplicate program/law which took effect January 1, 2004. We are committed to manage within these guidelines of this legislation.

Consent is then required for the use of individual and group photos, the listing of names for schedule activities, the use of names and pictures in newsletters, annual reports and other public relations documents and the use of telephone numbers in the Shalem Seniors Community Directory. It is the intent that the Act should be applied in a common-sense manner and should not negatively affect a person’s life. The purpose of this notice is to inform you about the collection and use of your personal information by the management of Shalem Society for Senior Citizens Care.

Below are the uses by Shalem of your personal information which require your informed positive consent:

I, _____, consent to Shalem Society for Senior Citizens Care to use my personal information in the following ways:

INITIAL EACH BOX SEPARATELY

- | | |
|--|--|
| | - The use of your name, photos and comments in activity calendars, newsletters, Shalem Website, or other Shalem Society publications. |
| | - The taking of individual or group photos and the use of your photo for display purposes at Shalem, on the Shalem Website, in or elsewhere in the Shalem Community. |
| | - The use of your name and telephone numbers for use by authorized Shalem staff in carrying out their duties on behalf of Shalem Society. |
| | - The use of your name in listings or announcements at Shalem. |
| | - The posting of your name on sign-up sheets for service providers or bus trips |
| | - The use of your name, email and telephone number for publication in the Shalem Volunteer Directory (for staff use only) |

Anti-Bullying Contract

This contract serves to prove a Volunteers knowledge about the definition of and consequences for bullying, and to inform volunteers of Policies & Procedures regarding aggressive and inappropriate behavior at Shalem or while representing Shalem.

By signing this contract, {Volunteer name _____ },
(hereafter referred to as “Volunteer,”) understands that:

- Bullying can be physical, verbal, emotional, or spiritual in nature.
- Bullying consists of, but is not limited to name-calling, violence, theft, rumors, exclusion, threats, intimidation, put-downs and pranks.
- Shalem residents & staff should all be treated with courtesy and equality regardless of age, gender, race, religion, orientation, size, disability, intelligence, athletic ability or popularity.

Volunteers pledge to uphold the following rules:

- To abide by the Policies & Procedures concerning bullying and harassment.
- To report incidents of bullying to the Volunteer Coordinator or Shalem Management/Board of Directors.
- To stand up for victims of bullying.
- To encourage others to treat all Shalem residents & staff with respect and courtesy.
- To help make Shalem a place where everyone feels safe, heard, and respected.

The volunteer understands that any incidents of bullying will result in disciplinary action, up to and including the termination of the volunteer role and possible legal action:

(Volunteer’s Signature)

(Date)



Ethical Standards/Conflict of Interest Agreement

Shalem Society for Senior Citizens Care expects its Volunteers to observe the highest standards of business ethics.

No volunteer should take any action on behalf of Shalem that they know, or reasonably should know, violates any applicable law or regulation. This obviously includes such activities as bribery, kickbacks, falsehoods, and misrepresentation.

Shalem prohibits all volunteers from accepting gifts, gratuities, or entertainment from individuals and firms with whom Shalem does business. It is also a violation to give gifts to individuals or firms with whom Shalem does business. Excluded from this prohibition is the exchange of normal business courtesies such as luncheons or dinners, when they are proper and consistent with regular business practice. Also excluded are advertising or promotional materials and holiday or other gifts, which are of nominal value (less than \$25.00).

Failure to comply may result in corrective action, up to and including the termination of the volunteer role.

A. Do you or any member of your immediate family hold any "interest" in an "outside business" in such terms as defined above?

YES - If YES, please describe: _____

NO

B. Do you have any other relationships that might reasonably be regarded as creating a possible conflict of interest?

YES - If YES, please describe: _____

NO

I certify that I have read, understand, and will comply with the position on Conflict of Interest.

(Volunteer Name) (Volunteer Signature) (Date)



Reference Check Questionnaire / Letter

To whom it may concern,

(APPLICANT'S NAME), _____ is interested in volunteering at **Shalem Society for Senior Citizens Care** and has been asked to provide references. This person has supplied us with your name and address. We wish to receive current, accurate information about this person. The information you provide will be an important tool to help connect this volunteer with Shalem. Please base your assessment of this person on your experience of being with/and or working with this person. We expect this will take about 10 to 20 minutes of your time.

Shalem was formed with the mission and communal desire to provide a Christian setting that enhances the well-being of seniors. At the heart of Shalem is a Christian community where God is at work. At Shalem we seek to care, share and celebrate each other. We value respect and acceptance, justice, compassion, stewardship of resources, and community. We desire for our volunteers to be blessed by life at Shalem.

Reference's name: _____

What is your relationship to the person indicated above? How long have you known this person?

How would you describe her/his skills and suitability to volunteer in a seniors' home?

How would you describe the candidate's personality and temperament?

What would you identify as this person's strengths?

If you had to suggest some areas of improvement, what would they be?

How well does this person work independently?

How well does this person work as part of a team?

On a scale of 1 (very little) to 4 (very much); how much does this person exhibits these traits?

Dependable	1 2 3 4	Demonstrates Compassion	1 2 3 4
Trustworthy	1 2 3 4	Committed	1 2 3 4
Honest	1 2 3 4	Respects Confidentiality	1 2 3 4
Deals well with stress	1 2 3 4	Demonstrates Christian Character/Faith	1 2 3 4
Good Leader	1 2 3 4	Respects the elderly	1 2 3 4
Role model for others	1 2 3 4	Respects disabilities	1 2 3 4
Emotional stability	1 2 3 4	Emphasis on Community Building	1 2 3 4

Would you recommend this person for a volunteer role at Shalem? Please Explain

Reference Signature & Date _____

THANK YOU FOR YOUR TIME!

Please return this form via email to: volunteering@shalem.ca OR Mail to: Shalem Society for Senior Citizens Care, Recreation/Volunteering, 3008-51 St. S.W., Calgary, AB, T3E 6V8.

If you have any questions/concerns, contact Michelle Vanderwerff at: 403-240-2800 ext. 4

The information on this form stays in a confidential file in Shalem and is not shared with any outside organizations or institutions.