### Volunteer Form – The Toronto Roma Community Centre

Your Full Name ____________________________________________________________

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<th>First Name</th>
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Your Address:____________________________________________________________________________

# and Street,   City,   Province   Postal Code

Best Phone Number to reach you, including area code: ________________________________

Alternate Phone Number: __________________________________________________________

Email Address (please print clearly)___________________________________________________

Languages (Spoken Fluently)__________________________________________________________

Have you worked with a community centre before? _______________________________________

Please list any experience you feel is relevant: _________________________________________

How did you hear about The Toronto Roma Community Centre?_____________________________

What prompted you to get in touch with us? ____________________________________________

Areas of Interest: (please circle one or more areas which you feel you have time to dedicate to)

- Befriending (offering ongoing personal support for a service user)
- Interpretation/ Escorting (usually weekdays during office hours)
- ESL Tutoring (weekly session with an individual client)
- Public Education (information tables, newsletter production, public outreach)
- Social Events (holiday parties, picnics, volunteer nights, etc)
- Volunteer Advisory Committee (projects to improve the volunteering program)
- Fundraising (requires some fundraising experience)
- Other (List)_____________________________________________________________________

Approximately how many hours of your time per month can you contribute? __________________

- Background Information (you may also attach a resume, if preferred)
- Education
- Paid Work Experience, if any
- Volunteer Work Experience, if any
- Special Interests or Hobbies ______________________________________________________