

SCOTTISH RITE CHARITABLE FOUNDATION  
LEARNING CENTRE CALGARY

Name: \_\_\_\_\_ Date: \_\_\_\_\_

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

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: Home: (\_\_\_\_) \_\_\_\_\_ Work: (\_\_\_\_) \_\_\_\_\_ Cell: (\_\_\_\_) \_\_\_\_\_

E-Mail: \_\_\_\_\_

Type of Volunteer work in which you are most interested:

- Organizing/Planning
- Special Projects
- Receptionist/Filing
- Writing/Editing
- Other \_\_\_\_\_
- Committee Work
- Typing/Keyboarding
- Computer/Data Entry
- Security
- Fund Raising
- Answering Phones
- Art/Graphics
- Promotion

Day and Times Available:

- |         |                               |                               |           |                               |                               |
|---------|-------------------------------|-------------------------------|-----------|-------------------------------|-------------------------------|
| Monday  | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. | Wednesday | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. |
| Tuesday | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. | Thursday  | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. |
| Friday  | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. | Saturday  | <input type="checkbox"/> a.m. | <input type="checkbox"/> p.m. |

Type of Commitment you wish to make:

- Ongoing
- On Call (Special Projects)
- Short Term
- Recurring days or hours (explain) \_\_\_\_\_
- Other \_\_\_\_\_

Pertinent Educational or Volunteer Experience:

\_\_\_\_\_  
\_\_\_\_\_

*This application is to be submitted to the Centre Director, and will be treated as confidential.*