Amref Health Africa in Canada
Volunteer Application Form
Tel: (416) 961-6981
Fax: (416) 961-6984
Email: info@amrefcanada.org
www.amrefcanada.org

Date: __________________________

Name: _________________________________________________________________

Address: _______________________________________________________________
City: __________________________ Province: ____________________ Postal Code:_____

Home Tel #: __________________________ Mobile: ___________________________
E-Mail: ___________________________

1. How long have you known Amref Health Africa?
   Less than 1 year ☐ 2 yrs ☐ 3-4 yrs ☐ 5-6 yrs ☐ Other ______

2. How did you first learn about Amref Health Africa?
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

3. Why are you interested in volunteering with Amref Health Africa in Canada?
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________

4. Employment status:
   ☐ Working full-time   ☐ Student
   ☐ Working part-time   ☐ Raising a family
   ☐ Retired            ☐ On sabbatical
   ☐ Searching for job
   ☐ Other:
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
   ______________________________________________________________
5. Employment history

a) Current job:

Organization/Company: 

Responsibilities:

b) Past job:

Organization/Company: 

Responsibilities:

6. Volunteer history

a) Organization:

Responsibilities:

b) Organization:

Responsibilities:

7. Which languages do you speak?

8. Please indicate which areas of skill and interest:

- [ ] Event planning
- [ ] Fundraising
- [ ] Accounting
- [ ] Typing
- [ ] Finance
- [ ] Marketing
- [ ] Data entry
- [ ] Telephone
- [ ] Clip Art/Design
- [ ] Creative writing
- [ ] Media Relations
- [ ] Translation
- [ ] Other(s):

9. At which Amref Health Africa activities would you most enjoy volunteering? (Mark with X on as many as apply)

- [ ] Marketplace Gala
- [ ] Internet research
- [ ] Event planning
- [ ] Writing International
- [ ] Office/Administration
- [ ] Whatever is needed
- [ ] Graphic Design work
Other: _________________________

10. When are you available to volunteer with Amref Health Africa in Canada?

(Mark with X where applicable)

☐ Mon  ☐ Tues  ☐ Wed  ☐ Thurs.  ☐ Fri.  ☐ Sat  ☐ Sun

Time of Day:

☐ Morning  ☐ Afternoon  ☐ Evening

11. Do you have any concerns/constraints that could affect you volunteering with Amref Health Africa in Canada that we should know? (e.g., health problems, food sensitivities etc.)

If yes, please explain: __________________________________________________________

THANK YOU for your time and for supporting Amref Health Africa in Canada!