



# Cowichan Women Against Violence Society

103-255 Ingram St. Duncan BC V9L 1P3 250-748-7000 Fax 250-748-9364  
Email: cwav@cwav.org Registered Charitable Organization #118878339RR0001

## CWAV Society Volunteer Application

### Personal Information

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

E-mail address: \_\_\_\_\_ Gender: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_

### General Information

How did you hear about Cowichan Women Against Violence (CWAV) Society's Volunteer Program?

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Why do you want to volunteer with CWAV Society?

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What personal skills, volunteer experience, education or work experience do you have that you believe will make you a suitable candidate for this role?

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How much time do you have to volunteer? Do you have a preferred day of the week?

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Do you have any medical conditions/restrictions that we should be aware of?

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**What volunteer roles at CWAV Society are you most interested in?**

- Administration:**  
Reception duties, answering phones, welcoming clients and visitors to CWAVS.  
Assisting with general office duties such as photocopying, filing, data entry, prep for meetings and workshops.
  - Board Member:**  
Board members oversee the governance, finance and strategic direction of CWAV Society. An additional application and an interview must be completed prior to becoming a Board member.
  - Child-minding:**  
Includes supervision and play with children while mom is in group/counselling.
  - Information Technology:**  
Assist with development of CWAVS' online presence including website and social media monitoring and graphic design work.
  - Special Event Support:**  
Assist with the planning and execution of fundraising events, and/or public education events that are intended to raise awareness of the issues surrounding violence against women on our community.
  - Transition House:**  
Volunteering at the house may include haircutting, yard work, assisting women with cooking and/or meal planning and budgeting.
  - Other:**  
If you would like to volunteer your time and skills in an area not mentioned, tell us what you'd like to do.
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**CWAV Society recommends that women wait one year after accessing CWAV Society services before volunteering.**

- Yes    No   Have you used the services provided by CWAV Society?  
If yes, what was the last date on which you were a client of CWAV \_\_\_\_\_  
What was the service? \_\_\_\_\_

**Please provide contact information for two references (not related to you)**

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

Relationship: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

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

Relationship: \_\_\_\_\_

Contact Phone: \_\_\_\_\_ Contact Email: \_\_\_\_\_

**During the volunteer recruitment process, the following steps are mandatory:**

1. Attending a Volunteer Orientation Session
2. Interview
3. Criminal Record Check
4. Volunteer Training
5. Signing a Confidentiality Agreement
6. Completing a Reference Check

*If for some reason you do not complete these steps you may not be able to become a volunteer with CWAV Society.*

**Please read carefully and sign**

I confirm to the best of my knowledge that the information I have given in this application is correct. I understand and agree that any omission or misrepresentation may be cause for refusal of volunteer placement. I understand that a Criminal Record Check is required. I give consent for CWAV Society to contact the reference listed above and give permission for these references to release all relevant information requested.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Return your completed Volunteer Application Form to:**

Cowichan Women Against Violence  
#103-255 Ingram Street  
Duncan, B.C.  
V9L 1P3

Fax: (250) 748-9364

Email: [cwav@cwav.org](mailto:cwav@cwav.org) (Volunteer Application in Subject Line)