

Dear Potential Volunteer,

I am very pleased to have you interested in volunteering with us! We have many various needs for volunteer services at our Home. Rideaucrest encourages our volunteer core to augment the services of our staff, by supporting and assisting with special events and holidays, working in our coffee shops, and a variety of other roles which have more direct interaction with our residents. In our better weather seasons, residents enjoy outdoor walks in our courtyard gardens, and volunteer companions visiting regularly are warmly welcomed. We have a need for persons to work as activity program assistants and leaders, providing direct service or support to residents, as well as assisting our residents in the dining room with meals.

Please see the attached application form, and complete the required information. Contact me as soon as you have complete filling in as much information as possible, and we will schedule an interview to discuss how your interests will match the needs of our residents.

As a volunteer, you will be required to have a CPIC completed within the last 6 months, and due to working with a vulnerable population, we also require that you have a Criminal Records check completed, including vulnerable sector, with clear results. Rideaucrest will cover this cost for the CPIC and if you contact me I will provide a cover letter to you. You will also be required to have a pre-placement health screening form completed by a physician, which is included in this package. Both of these steps need to be completed prior to commencing your volunteer work.

Again, thank you for contacting me and pursuing volunteer work at Rideaucrest Home – our residents will be forever grateful!

Sincerely,

Laura Beavers  
Supervisor, Resident Programs and Services  
(613) 530-2818 ext.4225  
lbeavers@cityofkingston.ca



## Volunteer Application Form

The information collected on this form will help us to find the most appropriate volunteer placement for you. All information gathered will be kept confidential and will be used only by the City of Kingston.

### General Information

Application Date:

Department / Position Most Interested In:

Last Name:

First Name:

Street Address:

City:

Province:

Postal Code:

Home Phone:

Cell Phone:

Email Address:

Preferred Contact Method:

Languages spoken, other than English?

### Volunteer / Work Experience

Have you ever volunteered with the City of Kingston (circle one)?    Yes    No

If yes, in what capacity?

Why do you want to volunteer with the City of Kingston?

Briefly describe other volunteer / work experience in relation to the position you are most interested in.

### Time Availability

What days and times are you available to volunteer?

## Parental / Guardian Consent (if required)

\* Applicants under the age of 18 must have a parent / guardian fill out the following:

I am aware of and support my child / legal dependent's decision to volunteer with the City of Kingston.

First Name:

Last Name:

Relationship to Applicant:

Home Phone:

Work Phone:

Cell Phone:

Email Address:

Parent / Guardian Signature:

Date (dd/mm/yyyy)

## References

Name:

Relationship:

Contact Information:

Name:

Relationship:

Contact Information:

I hereby declare that the information I provided is complete and accurate. I understand that a false statement (written or oral) with the intent to mislead can disqualify me from volunteering and may be grounds for dismissal if I am selected.

I understand that I will be asked to provide a CPIC (Criminal Record Check, including Vulnerable Sector if volunteering in capacity that interacts with vulnerable population) upon selection as a volunteer. I also understand that the City of Kingston has the right to request ongoing CPIC's, as per the City of Kingston's policy.

I authorize the Corporation of the City of Kingston to contact the person(s) or organization(s) listed above for the purpose of obtaining reference information. These persons/organizations are authorized to disclose such information and I hold them harmless for the information they shall provide.

I understand that attendance at a general orientation is mandatory.

**Applicant Signature:** \_\_\_\_\_

**Date (dd/mm/yyyy):** \_\_\_\_\_

## Closing Statement

We thank all of those who apply; however, only those selected for further consideration will be contacted. The City of Kingston is an equal opportunity employer. Accessibility accommodations are available for all parts of the volunteer recruitment and selection process. Applicants need to make their needs known in advance. Information collected will be handled in accordance with the Municipal Freedom of Information and Protection of Privacy Act.

**Pre-Placement Health Screen  
For Volunteering at Rideaucrest Home**

Volunteer Name \_\_\_\_\_ Date \_\_\_\_\_

**TB Screening** - \*\* Test must be performed less than one month before starting as a volunteer

- A baseline two-step is required if Tuberculin status is unknown, and those previously identified as tuberculin negative with PPD/5TU.

*A single test is accepted when:*

- Mantoux skin test documented results of a prior two-step test or  
 documentation of a negative PPD within the last 12 months or  
 2 or more documented negative PPD at any time but if the most recent was >12 months ago  
 Record of positive TB skin test. If yes, has employee been screened/treated. Yes \_\_\_ No \_\_\_

Treatment/screening provided \_\_\_\_\_

Test	Date	Left/Right	Serum Name/ Expiry Date	Date Read	Reading (mm induration)	Initial
Mantoux Skin Test Step 1						
Mantoux Skin Test Step 2						

**Immunization History (please provide information if applicable)**

Immunization	Date Administered
<b>Influenza</b>	

\_\_\_\_\_  
Health Care Provider Name and Signature

\_\_\_\_\_  
Date