



# NOLA Volunteer Statement of Interest Form

*Please complete this form indicating your interest in volunteering with the NOLA. A staff member will contact you as soon as possible to discuss your involvement.*

***\*\*Due to the nature of the program all volunteers must commit to at least 2 years of involvement\*\****

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender:  Male  Female

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

City: \_\_\_\_\_ Prov: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Primary Phone: \_\_\_\_\_ Secondary Phone: \_\_\_\_\_

Email: \_\_\_\_\_

## **SPIRITUAL JOURNEY:**

**\*\*While the M2/W2 Association does not require NOLA volunteers to be Christians, we do expect volunteers to uphold the Christian values of the agency as well as the principles of restorative justice.**

Do you attend a church regularly? YES NO

If YES, which church? \_\_\_\_\_

Tell us about your Spiritual Journey right now.

**STATEMENT OF INTEREST:**

Please tell us in a paragraph or two, why you are interested in volunteering for the NOLA program.

**REFERENCES:**

Please provide the names of three persons, not related to you, that you have known for a minimum of 2 years. If possible, include one previous or current employer and one character reference. Please make sure your references know they will be contacted.

1. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

How do you know this reference? \_\_\_\_\_

2. Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

How do you know this reference? \_\_\_\_\_

**Thank you for taking the time to complete in full this application form and for expressing interest in becoming a volunteer with M2/W2 Association and the NOLA Program.  
All information submitted as well as received is kept strictly confidential.**

By signing this application form:

- I agree that all information provided is true and accurate.
- I agree to submit to a Criminal Record Check and any other screening as required.
- I understand that my name, address, email and phone number(s) will be on the M2/W2 mailing list so that I can receive M2/W2 newsletters, invitations and volunteer training information.
- I understand that CSC/ B.C. Corrections will be gathering their own information in regards to my application and as such M2/W2 is not responsible for their use or distribution.
- I understand that M2/W2 is a faith-based agency and I commit to upholding these values. At the same time, I understand that my role as a volunteer is not to proselytize or to convert program participants.
- I understand that this application does not guarantee acceptance into the program, and the M2/W2 Association is under no obligation to accept or assign me as a volunteer in their program at this time, and is not obliged to provide a reason.

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

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

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