

**Contact Information**

Name: \_\_\_\_\_  
 Street Address: \_\_\_\_\_  
 City: \_\_\_\_\_  
 Postal Code: \_\_\_\_\_  
 Contact number: \_\_\_\_\_  
 Email: \_\_\_\_\_

**Availability**

Weekdays	Y/N	Mornings	Y/N	Afternoons	Y/N	Evenings	Y/N
Weekends	Y/N	Mornings	Y/N	Afternoons	Y/N	Evenings	Y/N

Which volunteer position are you interested in?

Donation Pickups \_\_\_\_\_  
 Donation Delievery \_\_\_\_\_  
 Sorting/organizing \_\_\_\_\_  
 Handyperson \_\_\_\_\_  
 Transition House help \_\_\_\_\_

**Interests**

Why do you want to volunteer for Ishtar Transition Housing Society?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Outcomes**

What do you hope to achieve from your work here at Ishtar Transition Housing Society?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Special Skills or Quailfications**

Summarize your special skills or qualifications that would be relevant to your work at Ishtar.  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

## Previous Experience

Please describe any experience that you already possess, related to violence against women and children.

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How did you hear about Ishtar Transition Housing Society?

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## Our Values

In everyday practice, we are held accountable by the values that connect us; Intergity, Honesty, Trust and Respect. These values guide our relationship with each other and our work with women and children.

## Our Mission

Feminist leaders and their allies advocating change through service to women and children who have expericenced violence and abuse by providing safe space. We engage, empower and educate individuals and the communtiy.

## Our Vision

Feminist leaders working together locally to eliminate violence against women globally.

## Agreement

By submitting this application, I affirm that I am over 19, support Ishtar Transition Housing Society's statement of Principles (above) and will consent to have a criminal record check completed. The facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, and false statements, omission, or other misrepresentations made by me on this application may result in my immediate dismissal. I agree with, and promote Ishtar Society's Values, Vision and Mission.

Signature

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Date

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Thank you for completing this application form and for your interest in volunteering with us.

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## Office Use Only

Application Status

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Approved/ Not Approved

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Date

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Board of Director Signature