Ville de Saint-Luc

Citizens On Patrol

APPLICATION FORM Confidential once completed



PERSONAL INFORMATION

Name							
Home address							
City				Province		Postal	
Home phone				Work phone			
Cellular phone				E-mail			
OTHER INFORMA	TION						
Date of birth	YEAR		MONTH		DAY		
Drivers license #							
Shirt size	S	M L	XL	XXL			
Do you consent t	o a police record	ls check bei	ng perfori	med ?	YES	NO	
EMERGENCY CO	NTACT						
Name					Phone 1		
Relationship					Phone 2		
REFERENCES (p	lease include 2 r	ion-family re	eferences)				
Name					Phone 1		
Relationship					Phone 2		
Name					Phone 1		
Relationship					DI		
Name					Phone 1		
Relationship					Phone 2		
VOLUNTEER EXP	PERIENCE						
Do you have any e	experience with ot	her voluntee	r organisat	ions ? If so, plea	ase list them, expl	ain tasks performed a	and dates.
MOTIVATION							
Why do you want t	o join this program	n? What do	you have t	to contribute ?			
SIGNATURE							

Signature of applicant: