

**BFO Kingston Region
Volunteer Registration**



Name: _____

Name: _____

Last First

Address: _____

Street/RR#/P.O. Box City/Town Postal Code

Phone: _____

Res. Bus. Cell.

Email: _____

- I am willing to commit to facilitating and/or providing peer support for BFO Programs over the next year.
- I am enrolling in this training for my own personal or professional enrichment and will remit the \$150.00 tuition. Please make cheque payment to Bereaved Families of Ontario – Kingston Region.

POSITION YOU ARE APPLYING FOR:

Please note that our groups are facilitated by volunteers who are themselves are bereaved. Please check all positions that you are interested in.

- Grieving the loss of a spouse
- Parents grieving the death of a Child
- Living with Loss – Greater Kingston Area
- Living with Loss – Belleville/Napanee area
- Living with Loss – Sydenham/Verona area
- Living with Loss – Gananoque
- Support Facilitator for Children`s Group
- Living with Loss for Young Adults
- Living with Loss for Seniors (60+)
- H.E.L.P. After Suicide (Hope, Empathy, Love and Patience)
- One-on-one Support Facilitator
- Training the Trainer – Bringing on New Facilitators
- Other : _____

What experience or education do you bring to this role?

What motivates you to take on this role?

What goals do you have that can be achieved through taking on this role?

How can BFO help you achieve these goals? (training, feedback, providing readings, etc.)

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Name:

EMPLOYMENT HISTORY – if applicable

Company #1	Company #2
Position	Position
Dates	Dates

VOLUNTEER HISTORY – if applicable

Organization #1	Organization #2
Role	Role
Dates	Dates

REFERENCES: Please provide contact information for references (other than family members). References can be from employers or other organizations with which you have volunteered. By providing this information, you are giving Bereaved Families of Ontario – Kingston Region permission to contact them.

Reference #1	Reference #2
Telephone number or email	Telephone number or email
Relationship to you	Relationship to you

POLICE VULNERABLE SECTOR CHECK:

All our volunteer facilitators are required to provide or obtain a police vulnerable sector check and have it renewed every two years. If you have committed to Bereaved Families of Ontario – Kingston Region for a period of at least one year; your Vulnerable Sector Check fee will be reimbursed.

Bereaved Families of Ontario – Kingston Region will provide a letter outlining the nature of the role and why a record check is required.

By clicking the check-box, you are confirming that the information you provided in this form is complete and accurate.

Yes, the information I provided is complete and accurate.

The information on this application is collected to determine eligibility for Bereaved Families of Ontario – Kingston Region volunteer opportunities and to safely, effectively, and responsibly implement our volunteer program in accordance with the Freedom of Information and Protection of Privacy legislation.

Date:

Signature: (please print name)
