

**Trail Family and Individual Resource Society
Volunteer Application Form: Crisis Line Program**

Personal Information:

Name: _____

Address: _____

Telephone: _____

Email: _____

Best time to contact: _____

What is your availability: _____

Questions: Please answer as clearly as you can

Do you have any education and or training, and or work experience that may relate to volunteering with the Crisis Line?

Why do you want to volunteer in the crisis intervention field and what do you hope to gain personally from the experience?

What skills or personal qualities do you possess that would make you a good volunteer with the Crisis Line?

Give an example of a time your communication skills were put to the test?

How do you respond to others who seem unable to grasp what you feel are obvious situations and solutions?

Are there any issues, topics or views that you have strong feelings about?

If a caller chose an option or plan of action with which you strongly disagree, how would you handle it?

What stresses are you currently experiencing in your life?

What do you do to relax?

Describe a personal issue or crisis you have faced, explain how you handled it and what you feel you learned from the experience. How might this experience affect your work at the Crisis Line?

What else would you like to add that would give us a clearer picture of who you are?

Volunteers are expected to volunteer 16 hours a month for 6 months or longer. Do you foresee any problems fulfilling your volunteer commitment? If yes, please provide a brief description.

What other commitments (personal or professional) do you have in your life at this time?

How did you hear about volunteering at the Crisis Line?

Please List 3 non-family references providing their name, relationship with you and their telephone number.
* Your references must be aware that we will be contacting them prior to us calling.

Name	Relationship	Phone Number
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* All volunteers must be nineteen years or older.

Thank you for completing this application. The Coordinator will be in touch with you shortly.

Please return it to FAIR at: 2079 Columbia Ave
Trail, BC, V1R 1K7
Ph. 250-364-0274 Fax 250-364-1480
SDudek@trailfair.ca