**ALIES & The Back Porch**

**Volunteer Application**

**Name: Date of Birth:**

**Address:**

 *Street City Prov Postal Code*

**Email: Phone:**

 (please circle one) Home / Work / Cell

**Occupation / Employer:**

**Educational Background:**

**Church/Religious Affiliation:**

**Previous Volunteer Service/Experience:**

**How did you come to hear about ALIES & The Back Porch?**

**Why are you interested in volunteering with ALIES & The Back Porch?**

**How does your spouse/family feel about your involvement with us?**

**Have you ever had an experience** (yourself/family/friend) **with an unplanned pregnancy or abortion?**

**How would you rate your communication skills and your ability to present information clearly?**

Please Circle One

 **1 2 3 4 5 6 7 8 9 10**

**I have a difficult time I speak well and am confident**

**communicating what the listener perceives correctly**

**I mean to say. what I mean to say.**

**Speaking with abortion-minded clients is emotionally taxing work that is not for everyone. Are there any issues or events in your life that may affect your volunteer service with us?**

**If Yes, please describe:**

**Under which circumstances/situations do you feel abortion is acceptable?**

**Volunteer Shift Availability Information**

Morning shifts are 8:00am - 12:00pm

Afternoon shifts are 12:00pm - 4:00pm

**Please mark which of the following shifts you would like to serve:**



**Letter of Reference: Along with your application, we require a letter of reference from your priest, pastor, or spiritual leader to be sent by them directly to The Back Porch. They can send their letter of reference via email, fax, regular mail or by dropping off at our office.**

Thank you for your interest in volunteering with ALIES & The Back Porch!

Please have your completed application form and letter of reference

 returned to our Coordinator, Samantha Williams.

Drop-Off: 10958 124 Street, Edmonton, AB

Mail: Box 11507, Edmonton, AB T5J 3K5

Email: coordinator@alies.ca

Fax: 780-488-0166

THANK YOU!