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**GRG SUPPORT LINE**

Mondays – Fridays  
11 AM to 3 PM  
604-558-4740  
(Lower Mainland)  
1-855-474-9777  
(toll-free in BC)  
[grgline@parentsupportbc.ca](mailto:grgline@parentsupportbc.ca)

### Volunteer Facilitator Application Form

Volunteer facilitators are an essential ingredient for the success of our parenting support programs. This important volunteer position requires successful completion of 20 hours of initial training; commitment to attend occasional skill building workshops and seminars; participation in monthly or bi-monthly facilitator or Steering Committee meetings and the weekly responsibility of facilitating a Parent or GRG Support Circle. Most groups meet for two hours a week and, in addition, there will be some time spent contacting new and ongoing participants, promoting the circle; and taking care of other organizational details for the group (purchasing snacks, tracking and reporting attendance; carrying out evaluations).

Date \_\_\_\_\_ Phone number (home) \_\_\_\_\_  
 Name \_\_\_\_\_ Phone number (cell) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_  
 Postal Code \_\_\_\_\_ Email Address \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ Ages of children (if any) \_\_\_\_\_  
 Languages spoken \_\_\_\_\_

Highest level of education completed:

- |   |   |
|---|---|
| <input type="checkbox"/> Some secondary school      | <input type="checkbox"/> Some post-secondary education      |
| <input type="checkbox"/> Secondary school diploma   | <input type="checkbox"/> Undergraduate degree               |
| <input type="checkbox"/> Trade or technical college | <input type="checkbox"/> Graduate degree (Masters, PhD etc) |

Briefly describe any courses or training that you have taken which is relevant to volunteering with support circles:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Occupation:

- |   |  |
|---|--|
| <input type="checkbox"/> Employed (Full time) | <input type="checkbox"/> Employed (Part time at ____ hours per week) |
| <input type="checkbox"/> Student              | <input type="checkbox"/> Working at home                             |
| <input type="checkbox"/> Unemployed           |  |

Please list your work experience starting with the most recent:

Organization	Position	Length	Date

Please list your volunteer experience starting with the most recent:

Organization	Position	Length	Date

Below are commonly listed reasons for why people wish to volunteer. Please rate each category according to your own personal reasons for volunteering:

	Very important	Important	Not very important
Career change			
Work experience			
Community support			
Helping others			
Free time to spend			
Meeting people			
Developing communication skills			
Improving interpersonal skills			
Developing leadership skills			
Learning public relations			
Personal satisfaction			

Do you have any other reasons for why you would like to volunteer with us?

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What strengths, special abilities or knowledge do you have that you feel would contribute to your role as a PSS volunteer?

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How do you feel that you can contribute to the prevention of child abuse?

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How do you provide for emotional and psychological support for yourself?

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What cities, towns or municipalities are you available to volunteer in?

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What times and days are you available to volunteer:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Late afternoon							
Evening							

Do you have time to participate in the following?

- Initial training of 20 hours (please ask for training dates, you are required to attend all three days)
- Ongoing training (workshops, seminars and teleconferences)
- Monthly or bi-monthly facilitator or steering committee meetings (if applicable)

Are you willing and able to commit to a minimum of five hours per week of volunteer service?

- Yes       No

Are you willing to ensure the continuity of a group by making a minimum commitment of one year?

- Yes       No

Please list three references. They should include an employer (preferably, a supervisor), a relative or someone who knows you well, and someone you know from a previous volunteer position or educational setting (i.e. a professor, minister, volunteer coordinator)

Name	Relationship	Day Phone Number	Email Address

How did you learn about this position?

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If accepted for this position, you will be required to provide a criminal record check prior to facilitating a group. Thank you for filling out this application form.

I, \_\_\_\_\_, on the \_\_\_ day of \_\_\_\_\_, 20\_\_\_, hereby authorize Parent Support Services Society of BC to contact the references I have provided to assist in determining my suitability for this position.

\_\_\_\_\_  
Signature