



Shalom BC Volunteer Centre
604-257-5181
Email: volunteer@shalombc.org

Agency Request Form

Agency ID# _____ Opportunity ID# _____ Contact ID# _____
Date inputted into Database: _____

Agency Information:

Agency name _____ Department or Event _____
Location/Address _____
Telephone _____ Fax _____ Email _____

Contact Information:

Contact name _____ Contact title _____
Telephone number (if different from above) _____
Email (if different from above) _____ website _____

Overview:

Position title _____ Description _____
Specific duties and responsibilities _____
Qualifications sought _____
Dates required _____ Time required _____
#of people required _____
Specific address (if different from Agency) _____

Note: Shalom BC does not conduct criminal reference checks on volunteers. It is the requesting Agency's responsibility to screen and train volunteers according to your organizational requirements.

Thank you for your request. We will contact you shortly.