

3122 Gibbins Road · Duncan BC V9L 1G2 · 250-701-4242 info@cowichanhospice.org · www.cowichanhospice.org

## **VOLUNTEER APPLICATION**

- 1. Based on your understanding of what a hospice volunteer does, what do you envision bringing to that role?
- 2. Please tell us a bit about your work and/or volunteer experiences.
- 3. Why do you want to be a hospice volunteer, and what are the qualities you think you would bring to your work?
- 4. At Hospice, the values of equity, diversity and inclusion are very important. Can you tell us a bit about what this means to you?
- 5. What would you like to tell us about yourself that would contribute to the diversity of our volunteers (ethnic or race, culture, gender identity, languages spoken, lived experience, etc.)?
- 6. Please tell us a bit about your experiences of grief.
- 7. Please tell us about your personal supports and how you take care of yourself when you are struggling?

- 8. What hobbies, activities or skills do you enjoy?
- 9. Tell us about your connection to the Cowichan Valley and what keeps you here.
- 10. How do you hope to benefit from the hospice training?
- 11. Please describe the time and availability you have for volunteerism (what is the ideal number of hours per week, and what days are you available)?
- 12. Do you have access to and comfort using the internet, zoom and email?

Please provide two letters of character reference along with this application. Letters of reference can be mailed or dropped off at the above address or emailed to: <u>frontdesk@cowichanhospice.org</u>

Signature:

Date:

Thank you from Cowichan Hospice

Caring for families through advancing illness and grief since 1981