

Family Engagement Mentorship Application Form

Date: _____

Personal Information

FirstName		Last Name	
Address		City/Province	Postal Code
Phone Number	Mobile Number	Email Address	
Language Spoken	Home Country	Emergency Contact Name & Number	

Connection to Mosaic

How did you hear about Mosaic? _____	Have you been involved with Mosaic before? <input type="checkbox"/> No <input type="checkbox"/> Yes _____ (Example "LINC, Family Programs, etc.)
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Documents

Check any documents you already have:

Child Abuse Registry

Criminal Record Check

Resume

Child Assistant Certificate

First Aid Training

Availability

Days	Morning	Afternoon
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		

Location of Preference

Downtown area

406 Edmonton St. - Knox Church

397 Carlton St. - Office

South area

1771 Pembina Hwy. – Fort Garry

The personal information entered this registration form by prospective volunteers will be accessed by persons responsible for administering volunteer programs with Mosaic – Newcomer family Resource Network. It will be used only for the purposes of recruiting, selecting, and placing volunteers.

What are your volunteer focus interest?

Childcare Assistance

Program Mentee Facilitator

Family Resource Centre Staff

What is your long-term goal?

Continue studying to become an Early Childhood Educator (ECE).

Work immediately after finishing the program.



Newcomer Family Resource Network

Newsletter and Emails

Subscribe for email newsletters, promotions, special volunteer opportunities and other information that might be of your interest.

Office Use Only

Note