NWW - Volunteer Application Form

This form is for individuals interested in applying for a Volunteer Role within the NWW hockey association. We welcome applicants that are energetic and have a genuine commitment to all NWW participants, our mission and priorities.

NWW volunteers perform duties on a voluntary basis, are not eligible for remuneration, and shall not receive any financial benefit or gain in the performance of duties for the NWW’s. All volunteers will be subject to screening, vetting and approval on an annual basis.

Please fill out all required fields, and when complete, return with any associated attachments to volunteer@NWWarriorshockey.com.

1. Contact Information
* Applicants First and Last Name:
* Applicants Email Address:
* Applicants Home Address:
* Applicants Primary Phone Number:
1. Do you have children participating in NWW hockey?
* If so, what age groups, division level and programs are they at for the most recent season?
1. What role(s) are you interested in volunteering for? Please list in order of priority if you are interested in more than one role. You will likely only be selected for one role.
* Would you be willing to consider other roles if there is a need?
1. Volunteer Experience – Please provide information on other volunteer roles you have held. Please include the Organization, Role, Responsibilities, Date Started and Date Ended. If none, please answer with None.
2. Governance Experience – Please provide information on roles you have held on public or private boards. Please include the Organization, Role, Date Started and Date Ended. If none, please answer with None.
3. Please provide information on any certifications and professional designations that would be relevant to roles within NWW’s.
4. Please provide information on your most recent employment. Please include the Employer Name, Position, Date Started and Date Ended.
5. Please provide any further information that you would like us to consider when determining your volunteer placement (including resume or link to your online profile, LinkedIn, etc.). Include below or as an attachment.
6. Please provide at least 3 references with contact information.
* Reference 1: Full Name, Phone and Email
* Reference 2: Full Name, Phone and Email
* Reference 3: Full Name, Phone and Email

**By submitting this form, I declare that the information provided in this application is true and complete. I understand that any false information provided may be cause for denial of a volunteer placement or dismissal after placement. This information will be used to consider my eligibility for a suitable volunteer position in conjunction with the NWW volunteer screening, vetting and approval process. I authorize NWW’s to contact individuals or organizations I have named on this application to obtain further information that would assist with consideration of my application to be a NWW volunteer.**

**NWW volunteers must not only do what is required by our policies, but must also do what is "Right". The test for this is simple, ask yourself if there is any reason you would not want a NWW participant, parent, family or other stakeholder to be fully aware of your conduct and motives? Is anyone’s NWW’s hockey experience reduced or compromised by the action? If these questions cannot quickly be answered no, then you need to re‐think your actions and talk to the NWW Executives. This also includes situations where you may witness someone else within the NWW’s engaging in behaviours that are not “Right”. If there is any confusion with regards to complying with both the letter and the spirit of our NWW policies you are expected to promptly seek guidance.**

1. Do you agree to the above paragraphs? (Yes or No)

Date Completed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_