



# Alberta Police Based Victim Services Association

## PRE-APPLICATION

*Please indicate which position you are interested in applying for*

**\*ADVOCATE/VOLUNTEER** \_\_\_\_\_

**\*BOARD MEMBER** \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: Home: \_\_\_\_\_  
Work: \_\_\_\_\_  
Best Time to call \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Please list any skills which may be relevant to this position: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please tell us why you wish to volunteer for this program: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please drop off or fax to your local Police Detachment or Police Service. This is a preliminary questionnaire only, indicating your interest in receiving more information on the application process.

I understand and agree to a criminal record check by the Police as part of the application process for all Victim Services/Victim Assistance programs.

Signature of applicant: \_\_\_\_\_