



Down Syndrome Resource Foundation

Together. Hand in Hand.

Volunteer Application

Information provided in this document is strictly confidential and for the use of the DSRF volunteer program only.

Mr. Mrs. Ms. Miss

Name: _____
Last *First* *Middle*

Address: _____
(Apt) *Street*

City *Province* *Postal Code*

Contact Information: _____ () _____ () _____
Day *Evening*

_____ () _____
Cell *Email*

Emergency Contact: _____

Name *Relationship*

_____ () _____
Phone *Email*

Age 16-25 25-45 45-65 65 +

Languages Spoken: _____ *Fluent* *Functional*

Languages Written: _____ *Fluent* *Functional*

AVAILABILITY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
Morning							
Afternoon							
Early Evening							

Do you have any special needs or medical conditions we should be aware of? Yes No

How did you hear about the Down Syndrome Resource Foundation?

Why are you interested in volunteering at the DSRF?

What skills or training will you bring to your role as a DSRF volunteer?

Education

	Grade Completed / Status
Secondary School	
Post Secondary School	
Other	

Volunteer Experience

Organization Name: _____

Duties/Tasks: _____

Organization Name: _____

Duties/Tasks: _____

Work Experience (if applicable)

Company Name: _____

Duties/Tasks: _____

Company Name: _____

Duties/Tasks: _____

Please indicate which area(s) interest you for volunteering?

- Special Events and Fundraising
- Assisting with DSRF programs
- Assisting with administration duties
- Translating
- Data entry

Please provide two references:

Last Name:	First Name:
Contact Number:	Relationship:
Email:	
Last Name:	First Name:
Contact Number:	Relationship:
Email:	

Resume Attached? Yes No

I hereby certify that the information I have provided in this application is true and complete to the best of my knowledge. I understand that if I become a volunteer at the Down Syndrome Resource Foundation falsified statements made on this application shall be considered cause for removal from the volunteer program.

Signature: _____ Date: ____ / ____ / ____

Please attach resume and send to:
Attn: Nimet Tejpar, Volunteer Coordinator

Down Syndrome Resource Foundation

1409 Sperling Avenue
Burnaby BC V5B 4J8
Phone: (604) 444-3773
Fax: (604) 431-9248
E-mail: nimet@dsrf.org

CONFLICT OF INTEREST POLICY - VOLUNTEER

The Foundation greatly appreciates the time and effort of volunteers and their assistance in various aspects of the Foundations endeavours. The Foundation understands that volunteers may be involved with other charities and businesses and encourages opportunities to develop personally and professionally. In order to ensure that the interests of the Foundation are protected, all volunteers are expected to declare any outside activities that may pose a conflict of interest.

A conflict of interest arises when a volunteer, on behalf of him or herself, another person, company or entity:

1. Promotes, attempts to promote, or appears to promote a private, personal or business interest.
2. May personally derive advantage or benefit (financial or otherwise) from:
 - a) a DSRF decision she/he may have directly or indirectly influenced;
 - b) disclosure or use of DSRF information.
3. Presents a situation in which a fundamental divergence exists between the obligations of one's position with the DSRF and the obligations of an outside interest.

Volunteers shall have no competing interest or relationship which may prevent them and/or the DSRF from the objective exercise of any of their respective responsibilities. Specifically, volunteers:

1. Shall not receive remuneration, loans, services, discounts, privileges, gifts or entertainment given to or from any person, business or entity which may have current or future competing relationships with the DSRF.
2. Shall not accept personal remuneration for any service they provide on behalf of the DSRF, to the DSRF, or to any of its Partners. Any fees will be referred as a donation to the DSRF.
3. Shall not use their position to obtain for themselves, family members, friends or close associates employment or preferential treatment within the DSRF.
4. Shall neither use or permit others to use any DSRF data, confidential information, human, financial or other resources, property or materials for personal gain or to support personal causes.
5. Shall not use the DSRF name without authorization, or one's position with the DSRF in such a way as to lend weight or prestige to a public or private cause or to endorse a product or service with another company.
6. Shall not spend time on outside work while working at the DSRF.

Consequences of potential or actual conflict of interest will warrant investigation and possibly disciplinary action. In certain circumstances, legal proceedings may also be involved. Common sense and wise judgment are required if one is in or may be perceived to be in conflict of interest. If in doubt, volunteers should bring the situation immediately to the attention of Management.



D.S.R.F. DOWN SYNDROME RESOURCE FOUNDATION

As a volunteer of the D.S.R.F. Down Syndrome Resource Foundation (hereinafter called the Foundation) I hereby agree to abide by the Conflict of Interest Policy of the Foundation as of the date hereof:

Dated as of the _____ day of _____, 20__.

Signature

Print name

CONFIDENTIALITY POLICY

As a term and condition of permanent, part-time, contract or volunteer employment with the Foundation, the Employee/Volunteer agrees to assist the Foundation protect its confidential information and intellectual property, both during the Employee's/Volunteer's employment and afterward. Any failure by an Employee/Volunteer to uphold this agreement in full may result in immediate termination, or other actions, legal or otherwise being taken against the responsible party on behalf of the Foundation or the affected party.

Confidential Information: Confidential information means information or material relating to the Foundation's business or assets that is not generally available, known, or used by others, or the utility or value of which is not generally known or recognized as standard practice, whether or not the underlying details are in the public domain, including but not limited to: educational programs, clinical programs, services, computer programs, databases, contact lists, patient information, and fundraising plans.

Confidentiality Provisions: All records in the possession of the Foundation shall remain in the Foundation's possession and with the Foundation at all times at its place of business or other authorized place (as approved by the Executive Director) and at no time shall those records leave the address where they are stored, kept, or otherwise maintained by the Foundation without written authorization by the Executive Director.

No records in the possession of the Foundation shall be released to any party or individual for inspection or copying by electronic means or otherwise, and shall always remain in the possession of the person(s) who have authorized access to them. Authorized access will be given to the responsible party by the Executive Director.

All records in the possession of the Foundation shall be considered confidential and remain the property of the Foundation.

No person during or after employment with the Foundation shall release any confidential or proprietary information, records, or otherwise (written or by other means, including speech) that they have come into contact with or heard about or handled or come across or seen, while employed by the Foundation even under powers of the courts without first consulting with the Foundation's legal counsel regarding such release. This is not limited in scope to databases, contact lists or patient information, and will include all records that they have come into contact with including but not limited to all Foundation records.

Foundation Assets: All records in the possession of the Foundation shall remain in the Foundation's possession and with the Foundation at all times at its place of business or other authorized place (as approved by the Executive Director) and at no time, shall those records leave the address where they are stored, kept, or otherwise maintained by the Foundation without written authorization by the Executive Director.

The Executive Director shall first approve all records that are taken from the Foundation's place of business by any employee/volunteer. If such records are being taken home or otherwise to some other place not deemed safe by the Foundation, the records shall not be taken from the place of business. If records are being taken to a reasonably safe and secure place so that they may be worked on, the responsible party who is in charge of the records shall have authorization in writing by the Executive Director before such records are taken from the Foundation's place of business.



As a volunteer with the D.S.R.F. Down Syndrome Resource Foundation (hereinafter called the Foundation) I hereby agree to abide by the Confidentiality Policy of the Foundation as of the date hereof:

Dated as of the _____ day of _____, 20__.

Signature

Print name