PACIFIC CIVIC WORKS SOCIETY
700-838 W Hastings Street
Vancouver, BC V6C 0A6

PCWS-CS01 (2026/Apr/10)

COMMUNITY SERVICE APPLICATION

PERSONAL INFORMATION

Legal First Name *	Middle Name(s)	Legal Last Name *
Date of Birth yyyy • mmm • dd *	**Gender**	**Preferred Name**

CONTACT INFORMATION

Home Address	City	Prov.	Postal Code

Primary Phone No.	Type	Email *

EMERGENCY CONTACT

Full Name *	Relationship

Primary Phone No. *	Type	Email

COMMUNITY WORK SERVICE INFORMATION

Criminal Record Check *

Pacific Civic Works Society cannot permit anyone who has a criminal history which includes sexual offences or any known crimes targeting homeless or senior vulnerable adults to volunteer at its worksites. By signing this application, you affirm that you have no such criminal history and therefore meet Pacific Civic Works Society's criteria for Community Work Service Hours.

Required Community Work Service Hours *	End date to complete Community Service hours *

Availability

Medical concerns (i.e. physical injury, etc.)

* Indicates required field

DECLARATION

I, _____ certify that the personal information I have provided is true
full name of applicant
and complete to the best of my knowledge and that providing false or misleading information may result in the termination of my volunteer agreement.

Applicant Signature	Date yyyy • mmm • dd

Please submit completed form by email to Pacific Civic Works Society at volunteer@pacificcivicworks.org