

"BUILDING A PROMISING FUTURE FOR THE ORPHANED CHILDREN OF ZAMBIA"

REFERENCE

Please list one person as a reference.
Please do not list relatives: a friend, teacher, an employer etc are examples of valid references.

Name: _____,
(Last) (First) (MI)

Home Phone: (____) _____ Cell Phone: (____) _____

Work Phone: (____) _____

Relation: _____

COMMUNITY SERVICE PROGRAM

If you are a student who requires volunteer hours as part of this program, please provide the following information:

Grade _____ Number of hours required _____ Date hours are required by _____

I acknowledge and understand that if I am successful in obtaining a volunteer position, the position is conditional upon receipt of an original Criminal Record Search (Volunteer), Vulnerable Sector Screening that is acceptable to the Zambian Children's Fund Canada within 8 weeks of the commencement of my volunteer position. I understand that I am responsible for the cost (if applicable) of the Criminal Record Search.

Signature of Applicant: _____ **Date:** _____

Once more, thank you kindly for your interest in volunteering with **The Zambian Children's Fund of Canada (ZCFC)**.

For More Information Please Contact:

Tulsi Naik, HBA
Administrative Assistant / Volunteer Coordinator
Executive Committee
Zambian Children's Fund Canada

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✉ **EMAIL:** tnaik@zcfcanada.org