



VOLUNTEER FORM

Name: _____

Home Address: _____

Home Phone #: _____

School Name: _____

School Address: _____

School Phone #: _____

Association: _____

Years of Teaching: _____

Area(s) of Interest:

My present position is:

- Teacher
- Principal
- Vice Principal
- Substitute
- Other

FOR YOUR INFORMATION:

Society Standing Committees

Aboriginal Voice and Action
 Collective Bargaining/Regional
 Coordinators
 Curriculum and Teaching
 Education Finance
 Equity and Social Justice
 Group Benefits
 Professional Development/Regional
 Facilitators
 Teacher Education and Certification
 Workplace Safety and Health

Programs

Disability Benefits Plan
 DBP Case Management
 SAGE Council
 Young Humanitarian Awards

Teams

Teacher Action Cohorts
 Primary Prevention Team

Please advise which Society Committees you have previously served on and for which years.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please return this form to the Society, via fax or mail before May 24th, 2014.

**Marni Sharples
Executive Assistant
The Manitoba Teachers' Society
191 Harcourt Street
Winnipeg, MB R3J 3H2
(204)831-3082**

**Fax: 204-831-0877
Toll Free Fax: 1-800-665-0584**

Email: msharples@mbteach.org

The above information will be used for the purposes of processing your volunteer application i.e., sharing the information with the Provincial Executive as well as communicating with you. Should you be appointed to a committee, this personal information will be kept confidential and secure. In order to facilitate communication among committee members, this personal information may be distributed to the other members of the committee on which you are serving.

*I agree to this usage of my personal information _____
Signature*

/ms