

# ST. ALBERT VICTIM SERVICES

## Board Member

Volunteer Information Package and Application Form



*Helping Victims  
of Crime or Tragedy*

## ST. ALBERT VICTIM SERVICES

### Board Member Volunteer Information and Application

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The St. Albert Victim Services Unit (VSU) was established in May of 1992 and formed as a non-profit organization in 1993. The St. Albert Victim Services Unit works out of the St. Albert RCMP detachment located at 96 Bellerose Dr. in St. Albert. Trained volunteer advocates provide immediate crisis to those in need through intervention, emotional support, information and referrals to community agencies.

Volunteer advocates are available on a 24 hour basis to assist police members when dealing with victims of crime and tragedy, who are suffering severe trauma and stress. Some advocates are also available for immediate response to crisis situations on a crisis call out schedule.

The St. Albert Victim Services Board is a working board that meets every third Thursday of the month to govern the program and services provided. The board members volunteer at public relations events as well as at fundraising functions.

The majority of funding is received through grants from the Alberta Solicitor General and Public Security Ministry and the City of St. Albert. The balance of the operating funds are raised through board directed fund raising activities, such as casinos, dinner auctions, proposals to charitable organizations and other awareness activities that attract charitable donations.

The monthly board meeting takes place on the third Thursday of each month from 7 pm to 9 pm. Board members are involved in monthly sub-committee meetings such as the Personnel Committee, Fundraising Committee. There is a yearly fundraising event and duties vary depending on the event.

Applicants for a board member position submit an application to the Board Chair. A criminal record check will be performed prior to consideration for a board member position.

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Please Print

1. Name: \_\_\_\_\_

2. Maiden Name: \_\_\_\_\_ 3. Date of Birth: \_\_\_\_\_

4. Address & Postal Code: \_\_\_\_\_

5. Telephone Contact Numbers:

Home: \_\_\_\_\_

Work: \_\_\_\_\_

Cell: \_\_\_\_\_

6. Email Address: \_\_\_\_\_

7. Driver's License Number: \_\_\_\_\_

8. Educational Background:	Diploma Received	Year
High School: _____	_____	_____
College: _____	_____	_____
University: _____	_____	_____

Additional Courses or Certificates:

\_\_\_\_\_

\_\_\_\_\_

9. Employed \_\_\_\_\_ Unemployed \_\_\_\_\_ Retired Student \_\_\_\_\_

10. Place of Employment/Employer's Name: \_\_\_\_\_

\_\_\_\_\_

11. Would you object to a representative of VSU contacting your employer?

Yes                      No

12. May we contact you at work?

Yes                      No

13. How long have you been a resident of St. Albert? \_\_\_\_\_

14. Do you expect to live in St. Albert for the next year? \_\_\_\_\_

15. Have you ever been charged with a criminal offense? \_\_\_\_\_

16. What volunteer experience do you have? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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17. How did you hear of the Victim Services Program? \_\_\_\_\_  
\_\_\_\_\_

18. What skills do you believe you possess that would be of benefit to the VSU program?  
\_\_\_\_\_  
\_\_\_\_\_

19. Why do you want to join the Victim Services Board? How will it benefit you?  
\_\_\_\_\_  
\_\_\_\_\_

20. Are you prepared to commit 4-6 hours per month as a board member? (This includes a monthly board meeting).                      Yes                      No

21. Will you be able to attend board development training sessions in the next year? (May include weekends). Yes                      No

22. Please provide two references (not relatives) name, phone number and email addresses if available.

1. \_\_\_\_\_  
\_\_\_\_\_

2. \_\_\_\_\_  
\_\_\_\_\_

I, \_\_\_\_\_, give permission to the RCMP and / or a representative of Victim Services to obtain all information necessary to qualify me as a volunteer for the St. Albert Victim Services Program.

All statements I have made in this application are true. I understand that the RCMP or a representative of St. Albert Victim Services Unit may contact present or former employers to obtain references.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

All applications can be either dropped off or mailed to:

St. Albert Victim Services  
96 Bellerose Drive  
St. Albert, AB T8N 7A4  
(780) 458-4353  
Attn: Board Chair