



a centre for wellbeing  
for those with breast cancer

## VOLUNTEER APPLICATION FORM

Thank you for considering volunteering your time at The Think Pink Living Centre.

The Living Centre is a wonderful new resource designed to provide holistic supportive care for women and men diagnosed with breast cancer and their families. You are invited to complete this application form as indicated. The Director of Operations, Samantha Schembri will contact you to organise an informal interview. If successful, you will be invited to undertake volunteer training prior to commencing your volunteering at The Living Centre.

**Please note:** information provided in this document is considered strictly confidential.

**Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_      **Date of Birth:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**Title:** \_\_\_\_      **Surname:** \_\_\_\_\_

**Given Names:** \_\_\_\_\_

**Contact Details: (Home Phone)** \_\_\_\_\_ **(Work Phone)** \_\_\_\_\_

**(Mobile)** \_\_\_\_\_ **(Email)** \_\_\_\_\_

**Home Address:** \_\_\_\_\_

\_\_\_\_\_ **Postcode:** \_\_\_\_\_

**Language(s) spoken other than English:** \_\_\_\_\_

Please indicate your availability:

**Day(s) of the week:** \_\_\_\_\_ **Hour(s) in the day :** \_\_\_\_\_



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**Please indicate your area of volunteer interest:**

- General administration/data entry
- Reception
- TLC Peer Support Volunteer
- Admin support for education programmes/seminars
- Fundraising
- TLC Massage Team
- TLC Salon Services: hairdresser/beauty therapist
- Other \_\_\_\_\_

**Are you currently: (please tick as appropriate)**

**OCCUPATION:** \_\_\_\_\_

- EMPLOYED:     Full-time    Part-time    Casual     Student
- Retired     Seeking Employment     Other: .....

**Employment History: (briefly summarise)**

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**Educational Background:** \_\_\_\_\_

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**Skills:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Have you had an experience with breast cancer? Briefly describe below:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Hobbies/Interests/Community activities:**  
\_\_\_\_\_  
\_\_\_\_\_

**Have you had previous volunteer experience?**  Yes (please describe)  No  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**How did you hear about this volunteer position at The Living Centre?**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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**Briefly outline why you are interested in this Volunteer position at The Living Centre?**

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**Please complete the following sentence:**

**My expectations of being a Think Pink Living Centre Volunteer are:**

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**Reference – Please provide the name of someone (not related) whom we may contact for a personal reference:**

**Name:** \_\_\_\_\_

**Contact details:** \_\_\_\_\_

**Relationship to you:** \_\_\_\_\_

\* I hereby state the information provided in this document is true and accurate

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Please note all successful volunteers will be subject to a Victoria Police Check.



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**Please send your completed application form to:**

Samantha Schembri  
Director of Operations-The Living Centre  
Ground Floor/390 St Kilda Rd, Melbourne Victoria 3004  
Ph: 9820 2888 /F: 9820 0388/E: [sschembri@thinkpink.org.au](mailto:sschembri@thinkpink.org.au)

***Thank you for taking the time to complete this application form.***

**Listen & Support**

**Inform & Educate**

**Revitalize & Restore**

**EMPOWER<sup>®</sup>**