



Youth Volunteer Corps
2010/2011
Project Proposal



Attn: YVC Program Coordinator
Youth Central
#820, 1202 Centre Street SE
Calgary, Alberta, T2G 5A5
Phone: 403-266-5448
Fax: 403-264-0266
Email: yvc@youthcentral.com

AGENCY INFORMATION:

Agency: Agency Website:
Agency Email: Agency Phone:
Contact Person: Contact Phone:
Contact Email: Fax:
Mailing address:
Project address/meeting place (if different from above):

Is the project location accessible by Public Transit? Is the project location wheelchair accessible?

REQUESTING VOLUNTEERS FOR:

One-time event?

Date:

Time:

*Please make sure the above time reflects when the volunteers will need to be present at the project.

Team leaders conduct ice breaker and reflection activities at the beginning and end of all projects (approximately 20 minutes for each).

Does the above time allow for these activities? YES NO

On-going project?

Dates:

Time(s):

Number of volunteers requested (minimum of 6):

Restrictions:

Briefly describe the project you are proposing. Please include the project goals and recipients of the service as well as whether there will be refreshments/food available for volunteers.

Three horizontal lines for project description.

Please list the tasks to be completed by volunteers (if needed please attach additional information). **Be sure there are enough activities to keep the team of volunteers busy for the duration of the project.**

It is the agency's responsibility to inform volunteers about the agency itself, including *its goals, policies and duties*. **Please note if the orientation takes place prior to the project, a team leader will attend in lieu of volunteers.**

Orientation Date: _____ Time: _____

EMERGENCY PLAN:

Please attach any relevant emergency policies and procedures, including fire exit plan (if available).

- Meeting point/place of gathering in the event of a fire or bad weather:

First Aid Kit(s) (stocked and carried/accessible):

YES NO

Emergency communications equipment carried and/or accessible (check any and all that apply):

- Telephone: _____ (Contact Name & Number)
- Cell phone: _____ (Contact Name & Number)
- Other: _____ (please specify)

Will the project take place outdoors?

YES NO

If so, and the weather is not permitting, will the event be rescheduled?

YES NO Date: _____

Project Proposal Submission Date: _____

The Youth Volunteer Corps is thankful for the partnership we share with your agency.
We would appreciate it if you would consider providing a small donation that would recognize the hard work of our volunteers and support future volunteers.

Something as small as \$20.00 would help us to provide YVC T-Shirts and volunteer recognition for our committed youth and ensure that we are able to continue to provide them with meaningful volunteer opportunities.