

Dear ESL Café Volunteer:

Thank you for your interest in volunteering with the Vaughan Public Libraries ESL Café. In this package, you will find the documents necessary to complete your application.

- ESL Café Tutor Job Description
- ESL Café Tutor Application
- York Regional Police Vulnerable Sector Check Application
- Photo permission form **(optional)**

Submit your completed applications to either Dufferin Clark Library or Vellore Village Library. All documents listed above (unless optional) must be submitted for the application to be considered.

Successful applicants will be required to attend an orientation & training session.

If you have any questions about the ESL Café or the application process, please contact Dufferin Clark Library (ext. 4243) or Vellore Village Library (ext.

Sincerely,
Vaughan Public Libraries
905-653-READ (7323)

VOLUNTEER JOB DESCRIPTION

JOB TITLE: VOLUNTEER – ESL CAFE TUTOR- SUPERVISED

REPORTS TO: Information Staff

SUMMARY

Under the direction of a designated supervisor, provides English language practice to adult newcomers.

RESPONSIBILITIES

1. Provide English language conversation, listening and speaking skills help with a 1 to 3 ratio of volunteer to newcomer.
2. Create an encouraging and positive environment for newcomers.
3. Good attendance and punctuality is required.
4. Supports the *Mission, Vision* and *Values* of Vaughan Public Libraries.
5. Responsible for following Health & Safety policies and procedures.
6. Record hours worked and tasks accomplished if required for community service placements.
7. Other duties as required.

QUALIFICATIONS

- Must be in Grade 10 or older – adults welcome.
- Ability to communicate courteously and effectively.
- Enthusiasm for working with people of all ages.
- Must be motivated, patient, dependable, and reliable.
- Proficiency in English language
- Volunteers must obtain and submit a Police Vulnerable Sector Check prior to participating in the program.

TIME COMMITMENT

- Volunteers are required to complete at least one 1.5 hour shift every other week. Program takes place on Sunday afternoons.

APPLICATION PROCESS

- Volunteers must successfully complete their application, an interview and a PVSC screening.

TRAINING

- Volunteers must attend an orientation & training session.

BENEFITS

- Volunteers will gain valuable work experience, develop teamwork and leadership skills, and get involved with the community.
- Volunteers will help newcomers to Canada integrate into their communities.

Please complete all sections of the form

Name: _____

Street Address: _____

City: _____ Postal Code: _____

Home Telephone: _____ Mobile: _____

Email: _____

Date of Birth: _____ Grade/Year: _____ Age: _____

VPL Library Card #: _____

 I give Vaughan Public Libraries permission to contact me regarding other volunteer opportunities.Occupation (if applicable):

Work Telephone (if applicable): _____

Your completed application must be returned to Dufferin Clark Library.

Vaughan Public Libraries endeavours to provide a safe environment for all library users. In keeping with this objective, applicants will be asked to complete a Police Vulnerable Sector Check prior to the commencement of their volunteer work. The fee for the Police Vulnerable Sector Check will not be refunded to Reading Buddy applicants.

Personal information on this form is collected under the authority of the Municipal Freedom of Information and Protection of Privacy Act, 1990, MFIPPA\Regulation 29. Personal information collected on these forms is used to contact program participants. After the program the forms are destroyed and non-identifying statistical information is retained. Questions regarding the collection of this information should be directed to the Chief Executive Officer, Vaughan Public Libraries, 2191 Major Mackenzie Drive, Vaughan, Ontario, L6A 4W2, 905-653-READ (7323).



YORK REGIONAL POLICE POLICE VULNERABLE SECTOR CHECK

Must print legibly (names, street, city, province, postal code) as this is your mailing label.

UNIT 1. TO BE COMPLETED BY APPLICANT

Last Name		First Name		Middle Name	Maiden / other names	
Address (# and street name)			Apt #	Male <input type="checkbox"/>	Female <input type="checkbox"/>	Place of Birth
City	Province	Postal Code		Date of Birth (DD/MM/YY):		
Phone Number:			E-mail:			

Reason for Request

I am an applicant for a position with a person or organization responsible for the well-being of one or more children or vulnerable persons.

Description of the paid or volunteer position	Name/address of the person or organization

Description of the responsibilities towards children or vulnerable person(s)

Address History – Complete address history for the past 5 years

Street Name and Number (please state below)	Apt/Unit #	City	Province	Postal Code	# of years at address

Requested and Fee received by – Badge#

UNIT 2. POLICE USE ONLY – One box must be checked for each section

1. RESULTS FOR NAME- Based criminal record verification

<input type="checkbox"/>	Negative	Based solely on the name(s) and date of birth provided and the criminal record information declared by the applicant, a search of the RCMP National Repository of Criminal Records did NOT identify any records with the name(s) and date of birth of the applicant. Positive identification that a criminal record does or does not exist at the RCMP National Repository of Criminal Records can only be confirmed by FINGERPRINT comparison. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.
<input type="checkbox"/>	Incomplete	Based solely on the name(s) and date of birth provided and the criminal record information declared by the applicant, a search of the RCMP National Repository of Criminal Records could NOT be completed. Positive identification that a criminal record does or does not exist requires the applicant to SUBMIT FINGERPRINTS to the RCMP National Repository of Criminal Records by an authorized police service or accredited private fingerprinting company. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.
<input type="checkbox"/>	Possible Matches (See attached ___page for details)	Based solely on the name(s) and date of birth provided and the criminal record information declared by the applicant, a search of the RCMP National Repository of Criminal Records has resulted in a POSSIBLE match to a registered criminal record. Confirmation that a criminal record does or does not exist at the RCMP National Repository of Criminal Records can only be achieved by FINGERPRINT comparison. As such, the criminal record information declared by the applicant does NOT constitute a Certified Criminal Record by the RCMP. Delays do exist between a conviction being rendered in court, and the details being accessible on the RCMP National Repository of Criminal Records. Not all offences are reported to the RCMP National Repository of Criminal Records.

2. RESULTS OF FINGERPRINT COMPARISON SEARCH WITH THE NATIONAL REPOSITORY OF CRIMINAL RECORDS

<input type="checkbox"/>	No Records Identified
<input type="checkbox"/>	Records Identified – See attached
<input type="checkbox"/>	Not Applicable

3. RESULTS OF INVESTIGATIVE DATABANK AND LOCAL INDICES RESULTS	
<input type="checkbox"/>	NEGATIVE – No information was revealed that can be disclosed in accordance with federal laws and RCMP policies
<input type="checkbox"/>	POSITIVE – See attached page(s) for details

4. RESULTS OF POLICE VULNERABLE SECTOR SCREENING ONLY	
<input type="checkbox"/>	A search of pardoned sex offenders was conducted. No information to release.
<input type="checkbox"/>	A search of pardoned sex offenders was conducted. Information authorized for release.
<input type="checkbox"/>	A search of pardoned sex offenders was not conducted.

Date of Search _____ Customer Service Representative _____

NOT VALID UNLESS EMBOSSED WITH POLICE SEAL

Identification –MUST be Government Issued and include applicant’s name, date of birth, signature and photo of applicant.
 Health cards or SIN cards will **NOT** be accepted as identification

Type of ID produced :	ID Number :
Type of ID produced:	ID Number:

The Police Vulnerable Sector Check will include the following information as it exists on the date of the search:

- Outstanding entries, such as charges and warrants, Judicial Orders, Peace Bonds, Probation and Prohibition Orders
- Criminal Convictions from CPIC and/or local databases.
- Summary Convictions, for 5 years, when identified.
- Absolute and Conditional Discharges for 1 or 3 years respectively.
- Findings of Guilt under the *Youth Criminal Justice Act* within the applicable disclosure period.
- Criminal charges resulting in a disposition of Not Criminally Responsible by Reason of Mental Disorder.
- All record suspensions as authorized for release by the Minister of Public Safety.
- In very exceptional cases, where it meets the Exceptional Disclosure Assessment, non-conviction dispositions including but not limited to Withdrawn and Dismissed.

1. I hereby release and discharge the York Regional Police Service and all members and employees of the said Service from any and all actions, claims and demands for damages, loss or injury howsoever arising which may hereafter be sustained by myself as a result of the disclosure of information to me by the Police Service. I hereby authorize the York Regional Police Service to inquire into and disclose the results of any police records indicating criminal convictions, conditional discharges, absolute discharges and outstanding criminal charges to me and to conduct a local police contact search with any Police Service in Canada.

2. I certify that the information provided by me in this application is true and correct to the best of my knowledge and belief. I have read this consent, understand it and agree to it in its entirety.

Applicant’s Name
(Please Print): _____

Applicant’s Signature: _____ **Date:** _____

UNIT 3. POLICE VULNERABLE SECTOR CHECK

This section is restricted to applicants seeking employment and/or volunteering with vulnerable individuals.

“Vulnerable persons” means persons who, because of their age, a disability or other circumstances, whether temporary or permanent, (a) are in a position of dependence on others; or (b) are otherwise at a greater risk than the general population of being harmed by persons in a position of authority or trust relative to them.

CONSENT

POLICE USE ONLY

I hereby consent to a search being made in the automated criminal records retrieval system maintained by the Royal Canadian Mounted Police to find out if I have been convicted of, and been granted a pardon for, any of the sexual offences that are listed in the schedule to the *Criminal Records Act*.

I understand that, as a result of giving this consent, if I am suspected of being the person named in a criminal record for one of the sexual offences listed in the schedule to the *Criminal Records Act* in respect of which a pardon was granted or issued, I will be requested to provide fingerprints to confirm that record and that record may be provided by the Commissioner of the Royal Canadian Mounted Police to the Solicitor General of Canada, who may then disclose all or part of the information contained in that record to a police force or other authorized body. That police force or authorized body will then disclose that information to me. If I further consent in writing to disclosure of that information to the person or organization referred to above that requested the verification, that information will be disclosed to that person or organization.

**Contributing
Agency:**

**Signature of
Applicant:**

Date:

Personal information contained on this form is collected pursuant to the Police Services Act, s.41 and is collected for the purpose of processing this police record check. Questions concerning this collection should be directed to York Regional Police, 47 Don Hillock Dr., Aurora, ON, L4G 0S7. 905-830-0303 ext. 6781 or 7655

PHOTOGRAPHY / VIDEO - PERMISSION FORM

PERSONS 18 YEARS OF AGE AND OLDER

I _____, hereby give permission for the photograph(s) / video(s) taken of me onto be used by Vaughan Public Libraries and/or the media in electronic and print publications, and online communication vehicles, to promote the Libraries' programs and services.

If the photograph(s) / video(s) are used in any publication, I authorize

- My full name to be used
- I do not authorize my name to be used

Signed.....

PARENTAL CONSENT IS REQUIRED FOR PERSONS UNDER 18 YEARS OF AGE

I, _____(name of parent/guardian) of (first & last name of child) hereby give permission for the photograph(s) / video(s) taken of my son/daughter onto be used by Vaughan Public Libraries and/or the media in electronic and print publications, and online communication vehicles, to promote the Libraries' programs and services.

If the photograph(s) / video(s) are used in any publication,

- I authorize my son or daughter's full name to be used
- I do not authorize my son or daughter's name to be used

Signed.....