



ConnectWell Community Health Services

Community Volunteer Income Tax Program
In partnership with Canada Revenue Agency

Date Received

Volunteer Application Form

Last Name _____ First Name _____

Mailing Address (Street or R.R., Town, Postal Code)

Phone # _____ E-mail _____

Driver's License? Yes___ No___ Do you have a car? Yes___ No___ Do you have a laptop? Yes___ No___

Are you available?

February 2023 – April 2023 Yes___ No___ May 2023 – December 2023 Yes ___ No ___

List any previous or present experience, interest, skill, training or work that would relate to income tax filing.

Are you willing to do webinar trainings that are provided by Canada Revenue Agency? Yes___ No___

Are you willing to go through clearance with Canada Revenue Agency? Yes ___ No___

The following volunteer opportunities are available; please check those you are interested in

Volunteer income tax filer (training and software provided, some computers available)

- E-files client income tax returns during clinics yes___ No___
- E-files client income tax returns year round yes___ No ___

REFERENCES:

Name: _____ Phone number: _____

Name: _____ Phone number: _____

Name: _____ Phone number: _____

Signature for permission to call: _____

Please return form to ConnectWell Health and Community Services

Mail: 30 Bennett Street, Carleton Place, Ontario K7C 3M7 **Email:** to MHampton@connectwell.ca