



*St. John*

THE COMPASSIONATE MISSION

155 Broadview Avenue  
Toronto, ON M4M 2E9

Telephone 416.466.5877

Facsimile 416.466.3517

[www.stjohnsmision.org](http://www.stjohnsmision.org)

BN: 89328 1832 RR0001

# *St. John's Academy*

## Volunteer Application Package

Thank you for your interest in joining St. John's Academy. With dedicated volunteers, we can change lives!

St. John's Academy is a tutoring program designed for middle and high-school newcomer and at-risk youth in the South Riverdale community of Toronto, funded primarily through World Vision's Partners to End Child Poverty program. Approximately one quarter of the residents of the South Riverdale community live in poverty. Many are newcomers to Canada with dreams of attaining a good education for their children. However, with decreased resources at school and parents who are unable to speak English, academic support for these students is limited.

The goal of St. John's Academy is to increase the students' academic performance by equipping them with the skills and confidence they need to become successful and independent learners. This will be achieved by addressing skill gaps evident in English and Math. Tutors ideally will work with two students at a time facilitating learning via prescribed materials prepared in advance by the Program Director. Educational games and healthy snacks will be a part of the program also.

We have enclosed the Volunteer Tutor Application outlining details regarding the time commitments involved so you are better able to coordinate your availability. Please return this as soon as possible so we may begin the approval process.

Upon receipt of your application and references, we will be contacting you to schedule an interview and to answer any questions you may have about our program.

Thank you in advance for your time and consideration. If you have any questions or comments, please do not hesitate to contact us at 416 466-5877 or via e-mail at [stjohnsmision@sympatico.ca](mailto:stjohnsmision@sympatico.ca) .

Sincerely,

Lara Joannou  
Children's and Youth Program Director

Our purpose is to be and to build an inclusive community through the gifts and the needs that each of us brings. This Community of Love is a place of healing and nourishment occurring through awakening the God-given dignity and value of each person, while responding to each person's human needs.

## Confidential Volunteer Tutor Application

Please be sure to complete both pages of this application form and return it by hand, mail or fax to the attention of Lara Joannou at St. John the Compassionate Mission.

<b>Full Name:</b>	<input type="checkbox"/> <b>Male</b> <input type="checkbox"/> <b>Female</b>
<b>Address:</b>	
<b>City:</b>	<b>Postal Code:</b>
<b>E-mail</b>	
<b>Phone (day):</b>	<b>(evening):</b>
<b>Languages spoken:</b>	
<b>Professional title and name of current employer:</b>	<b>Student – name of university/college and program of study:</b>
<b>How did you hear about our program?</b>	

**Previous tutoring/teaching experience:**

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**Other experience with children or children's organizations:**

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**Community involvement – clubs or organizations:**

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**Why do you want to be a volunteer tutor?**

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**St. John's offers other children and youth programs e.g. Saturday kids club, Teen night, retreats, Summer camp activities. Would you be willing to volunteer in other programs at St. John's? (please circle the programs above that you would be interested in)**

Yes  No

**Can you commit yourself to the following in order to qualify as a tutor?**

**1. INTERVIEW:** Yes  No

**2. TIME:** Are you able to spend at least 1.5 hours per week for 9 months with the program (the program commences in October and ends in June)?

Yes  No

**3. AVAILABILITY:** Our program runs on different days. Please check off the days and times you are available. If you are unable to come at the times specified below, please list the times you would be available in the chart below.

MONDAY	TUESDAY	THURSDAY	SATURDAY
<input type="checkbox"/> 5:30-6:45pm <input type="checkbox"/> 6:45-8:00pm	<input type="checkbox"/> 5:30-6:45pm <input type="checkbox"/> 6:45-8:00pm	<input type="checkbox"/> 5:30-6:45pm <input type="checkbox"/> 6:45-8:00pm	<input type="checkbox"/> 10:00a.m.-11:15am <input type="checkbox"/> 11:15a.m.-12:30pm

**4. LOCATION:** The program will be run on location at St. John the Compassionate Mission, located at 155 Broadview Ave, Toronto (between Queen St. E and Dundas St. E)

Yes  No

**5. ORIENTATION AND TRAINING:** Approximately a three hour commitment.

Yes  No

**References:**

**Step 1:** Please fully complete the reference list below. One must be a character reference and one a professional reference (professor, work colleague)

**Step 2:** Please ensure that your selected references complete the attached reference form and send it directly to St. John the Compassionate Mission.

Name	Relationship to you	Phone #

**I understand the need for St. John the Compassionate Mission to conduct a criminal record check on all volunteers to ensure that the children who access our programs are protected.**

I agree

**I also understand that, should I qualify as a volunteer tutor, paying for this record check is my responsibility (the cost is \$15.90).**

I agree

**I understand that St. John the Compassionate Mission is an Orthodox Christian outreach mission. Although I am not required to share this faith, I will not deliberately contradict the teachings of this faith in my role.**

I agree

**Authorization for collection of personal information:**

**I authorize St. John the Compassionate Mission to contact the references listed above for information. I understand that the information obtained will be confidential.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# St. John's Academy

## Volunteer Tutor Reference Form



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Reference for:		
Reference provided by:	Phone #:	
Address:	City:	Postal Code:

The individual named above has applied to volunteer for St. John's Academy, an after-school academic enrichment program for local youth. Your name has been given as a reference. We would appreciate your honest and complete evaluation of the applicant. The information you share will be kept confidential.

**How long have you known the applicant?** \_\_\_\_\_

**In what capacity do you know her/him?** \_\_\_\_\_

### General qualities

	Above average	Average	Fair	Poor
Leadership abilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to assume responsibility	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to get along with others	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to cooperate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ability to work with children	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Willingness to learn	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Communication skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Response to authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Do you know of any reason why this person would not be suitable as a tutor for this program?** Yes ε No ε

Please explain: \_\_\_\_\_

**Would you entrust the applicant with the care of children and youth?** Yes ε No ε

Please explain: \_\_\_\_\_

**Is there any further information that would assist us in the consideration of this applicant?**

\_\_\_\_\_

*Thank you for your assistance. Please mail the completed reference form to the attention of Lara Joannou at St. John the Compassionate Mission*

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