



The Air Cadet League of Canada
(Quebec and Ottawa Valley)
Applicant Interview Form

Candidate : _____ Date of Interview : _____ Squadron : _____

Listen to the responses. Tick YES if the responses are viewed by the interviewers to be appropriate to the position for which the candidate is being interviewed. Use additional sheets to document the answers if required.

QUESTIONS	NOTES	
1. Why are you interested in applying to be a volunteer?		
2. As a volunteer, you will be involved in activities that include working with the cadets and the community. What are the skills you have that will be useful to the organization?		
3. Applicants for the Treasurer position: what is your experience with maintaining financial records?		
	Yes	No
4. Do you enjoy working with children? If so, please outline your experience.	<input type="checkbox"/>	<input type="checkbox"/>
5. Do you have any experience working with a youth organization? If so, which organization?	<input type="checkbox"/>	<input type="checkbox"/>
6. Have you ever been registered or screened as a candidate for volunteer work? If so, please talk about the organization and what your role was in the organization.	<input type="checkbox"/>	<input type="checkbox"/>
7. Is there anything in your background or past that you believe may prevent you from being registered as a volunteer?	<input type="checkbox"/>	<input type="checkbox"/>
8. Based on your responses to the question on page 2 of your application form CPQVO-102, (show them the section where they have responded and signed), is there anything you would like to discuss?	<input type="checkbox"/>	<input type="checkbox"/>
9. Have you ever been involved with the police or other authorities that would reflect on your background or on your likelihood of being screened positively for the position for which you are being considered?	<input type="checkbox"/>	<input type="checkbox"/>
10. Do you know of any limitations, physical, mental or otherwise that will impede your ability to carry out the duties of a volunteer?	<input type="checkbox"/>	<input type="checkbox"/>

TO BE COMPLETED BY THE INTERVIEWERS
(Signature and date are required)

_____ Interviewer– print name	_____ Second interviewer– print name	<p>Recommended (Check as appropriate)</p> <p>Yes No</p> <p style="text-align: center;"> <input type="checkbox"/> <input type="checkbox"/> </p>
_____ Signature of interviewer	_____ Signature of second interviewer	
_____ Date	_____ Date	