



**Fanshawe College Clinic**

Wellness Centre, Room J 1004  
 1001 Fanshawe College Blvd  
 London, ON, N5V 1W2  
 Tel: (519) 452-4230

**South Clinic**

3209 Wonderland Rd S  
 London, ON, N6L 1R4  
 Tel: (226) 667-3338

**Western University Clinic**

3M Centre  
 Lambton Drive  
 London, ON, N6A 3K7  
 Tel: (519) 661-3011

**General Information:**

Name: \_\_\_\_\_ Date of application: \_\_\_\_\_

Current Address: \_\_\_\_\_

Applying for which semester (please circle): **Fall** (Sept–Dec), **Winter** (Jan–Apr), **Summer** (May–Aug)

**Contact Details:**

Phone (Cell): \_\_\_\_\_ Email: \_\_\_\_\_

Emergency contact name and phone: \_\_\_\_\_

**Education:**

School: \_\_\_\_\_ Program: \_\_\_\_\_

Certifications: \_\_\_\_\_

Career aspiration: \_\_\_\_\_

**Previous Experience:**

Volunteer: \_\_\_\_\_

Work: \_\_\_\_\_

Relevant Interests/Hobbies: \_\_\_\_\_

Have you previously volunteered at Fowler Kennedy? If so, when? \_\_\_\_\_

To which clinic are you applying (please circle)?

- Fanshawe College Clinic
- Western University Clinic
- South Clinic

Please indicate your availability:

	Monday	Tuesday	Wednesday	Thursday	Friday
7–9:30AM					7–10AM
9:30AM–12PM					10AM–1PM
12–3PM					1–4PM
3–6PM					

**Note:** Please do not attach school and/or work schedules to indicate availability