


Returning Volunteer Registration

Visit the volunteer registration page and complete the [online volunteer registration form](#).

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Volunteer at tax preparation clinics

Do you want to help people in your community? Volunteer with a community organization that participates in the Community Volunteer Income Tax Program (CVITP), and complete income tax and benefit returns for eligible individuals.

How to volunteer

To volunteer, you should have experience completing income tax returns. Each year, you must:

1. Fill out the [online volunteer registration form](#)

You can fill out the registration form between mid-October and the end of February.

On the form, state which community organization you will volunteer with. If you do not volunteer with a participating organization, indicate this as well. A Canada Revenue Agency (CRA) coordinator will contact you to help you find a participating organization in your area.

Read the ‘**Volunteer registration 2018 : Program terms**’. Once you have read and understood the terms, check ‘**I declare**’ and click ‘**Next**’.

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Volunteer registration 2018: Program terms

0% Complete

1 Important

In order to volunteer with the [CVITP](#), you must read and agree to the program terms and select the checkbox in the **Confirmation of declaration** section to confirm that you have never been convicted under the Criminal Code or any Act of Parliament and that you read the Privacy Notice.

As a volunteer with the Community Volunteer Income Tax Program, I agree to:

- protect the taxpayer's privacy by never using or divulging any information provided by the taxpayer for any purpose other than the preparation of his or her income tax and benefit return;
- offer my services free of charge and decline any monetary reward that may be offered to me;
- return the completed income tax and benefit return to the taxpayer directly, or to the community organization;
- not keep any copies of a taxpayer's income tax and benefit return (paper or electronic);
- have the taxpayer sign Form TIS60, *Community Volunteer Income Tax Program - Taxpayer Authorization* and return it to the taxpayer;
- only use the Community Volunteer Income Tax Program tax software to prepare returns for eligible taxpayers;
- not use the tax software for monetary gain;
- not copy or allow copies to be made of the tax software;
- encrypt taxpayers' returns using the tax software and save electronic copies only on an encrypted USB flash drive, and transmit the return to the Canada Revenue Agency within 48 hours of preparation;
- delete all electronic copies of the taxpayer's return, no later than 48 hours after its transmission to and acceptance by the Canada Revenue Agency;
- allow the CVITP to share my contact information and registration approval with my affiliated community organization(s), or with other CVITP community organizations in my area if I require assistance to become affiliated; and
- allow the Community Volunteer Income Tax Program to make sure that I meet the security requirements to become a volunteer.

* Confirmation of declaration and Privacy Notice (required)

- I declare that I have never been convicted of any offence under the Criminal Code or any Act of Parliament that has not been pardoned or in respect of which a record suspension has not been ordered. This includes any offence involving evasion in the payment or remittance of tax; fraudulent transactions in which the public or any person is defrauded of property, money, valuable security or service; or possession of property obtained by crime or the proceeds of crime.


Personal information is collected under the authority of section 220 of the Income Tax Act (ITA), combined with paragraph 30(1)(a) of the Canada Revenue Agency Act and will be used to register volunteers, organizations and tax preparation clinics as part of the Community Volunteer Income Tax Program (CVITP) or the Volunteer Program (Quebec). Information may also be used to assess suitability to participate in these programs and may be disclosed to the extent authorized by law. Automated personal information matching will be used to identify returning participants in order to avoid duplication of accounts. A refusal to provide the information may result in the rejection of your registration request.

Personal information is described in Personal Information Bank CRA PPU 100. Under the [Privacy Act](#), individuals have a right to have their personal information protected. They also have the right to access, correct or notate this information and to file a complaint with the Privacy Commissioner of Canada regarding our handling of their information.

Next

If you are a returning volunteer select **'Yes'** and click **'Next'**.

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Volunteer registration 2018: Confirm prior registration


14% Complete

* Did you register online to be a CVITP volunteer after October 2014? (required)

Yes
 No

Fill out the Identification information.

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Volunteer registration 2018: Volunteer identification and address

20% Complete

Important

You must enter your personal identification information exactly as you did last year. If your personal information has changed, you can modify it later in the registration process.

Identification information

EFILE Number 

* First name (required) Middle name * Last name (required)

* Partial date of birth (required)

Address information

* Postal code (required)

Enter a 6 character postal code and click the search button to display additional information.

 ←

Enter the postal code and click


* Select one of the following addresses (required)

FRONT ST W, TORONTO, ON ←

Select the street name and click **'Next'**.

None of the above

Fill out the required fields, and click **'Next'**.

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Volunteer registration 2018: Address details

27% Complete

Address

FRONT ST W, TORONTO, ON

* **Street number (required)**

1

Street number suffix

Select

Suite number

Suite number suffix


Select

Postal code

M5J2X1

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Fill out the contact information, and click **'Next'**.

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Volunteer registration 2018: Volunteer contact details

34% Complete

Contact information

* **Primary phone number (required)**

(416) 111 - 1111 Ext

Secondary phone number

() - Ext

* **Email (required)**

abc@abcabc.com

* **Confirm email (required)**

abc@abcabc.com

* **Language of correspondence (required)**

English
 French

Previous **Next**

Verify the Identification information and click **'Next'**.

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Volunteer registration 2018: Review information

40% Complete

Important

Confirm that this information is correct. If there is anything you need to change, please select the Modify button.

Identification information

Name:	John Smith
Partial date of birth:	January 01, XXX0
Address:	1 FRONT ST W TORONTO ON M5J2X6
Primary phone number:	(416) 111-1111
Email:	abc@abcabc.com
Language of correspondence:	English

[Modify](#)

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Fill out the required information and click 'Next'.

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Volunteer registration 2018: Volunteer profile

47% Complete

*** Language (required)**

Please indicate if you can offer CVITP services in:

- English
- French

Other languages

Please indicate if you can offer CVITP services in any other language:

Afrikaans



You can select the language(s) you would like to add by selecting the language in the drop down menu and selecting 'Add'.

*** Number of years of experience completing tax and benefit returns (required)**

*** Number of years of experience in the Community Volunteer Income Tax Program (required)**

*** Are you a Chartered Professional Accountant (CPA)? (required)**

By answering yes, you consent to sharing your CVITP participation information with your CPA governing body.

- Yes
- No

*** Do you have a reliable internet connection to file returns electronically? (required)**

- Yes
- No

*** How did you hear about the Community Volunteer Income Tax Program? (required)**

CRA Website

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Volunteer registration 2018: Organization affiliation

54% Complete

Important

Please confirm or update the following information.

*** Do you have any current affiliation with a community organization? (required)**

- Yes
- No

At the bottom of the 'Volunteer registration 2018: Organization affiliation your organization from the last year's registration will be displayed. If you are volunteering with the same organization click 'Next'.

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Volunteer registration 2018: Organization affiliation (continued)

67% Complete

Important

Please confirm or update the following information.

Find your community organization

* Province/Territory (required)

Select

* City (required)

* Community organization name (required)

Start typing the name of the organization you are affiliated with. If the organization does not appear in the pop-up list, enter it manually.

Add

You have chosen to affiliate with one or more Organizations that are not yet registered for the 2018 year. You may wish to contact these Organizations to confirm their participation.

Selected organizations

Community organization name	City
<input type="checkbox"/> ABC Inc (Not registered)	

Remove selected organizations

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Select the appropriate response to your particular situation and click 'Next'.



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Volunteer registration 2018: Availability and software

74% Complete

* Please indicate your availability to volunteer with the CVITP. (required)

- Throughout Calendar Year
- Filing Season Only (February to April)

* How do you wish to receive the software? (required)

- Internet Download
- CD

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Volunteer registration 2018: Volunteer role

80% Complete

* Will you be preparing or filing Income Tax Returns? (required)

- Yes
- No

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Volunteer registration 2018: Volunteer role (continued)

87% Complete

* Will you be a lead volunteer? (required)

- Yes
- No

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Carefully review the 'Volunteer registration 2018: Summary' page. Once you have reviewed and confirmed that the information is accurate, check 'I confirm' and click 'Submit'.



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Volunteer registration 2018: summary

94% Complete

Volunteer identification details

Name:	John Smith
Day:	01
Month:	January
Year - last digit only:	1
Address:	1 FRONT ST W TORONTO ON M5J2X6

Volunteer contact details

Primary phone number:	(416) 111-1111
Email:	abc@abccbc.com
Language of correspondence:	English

Volunteer profile

Spoken languages:	English French
Number of years of experience completing tax and benefit returns:	0
Number of years of experience in the Community Volunteer Income Tax Program:	0
Are you a Chartered Professional Accountant (CPA)?:	No
Do you have a reliable internet connection to file returns electronically?:	Yes
How did you hear about the Community Volunteer Income Tax Program?:	CRA Website

Affiliated organization(s)

Do you have any current affiliation with a community organization?:	No
Reason that you have not affiliated with an organization:	I am a new volunteer and need help to become affiliated

Availability and software

Availability to volunteer with the CVITP: How do you wish to receive the software?:	Filing Season Only (February to April) Internet Download
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Volunteer role

Will you be preparing or filing Income Tax Returns?:	Yes
Will you be a lead volunteer?:	No

*** Confirmation of registration (required)**
 I confirm that the information provided is correct and complete.

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Submit

Confirmation page.

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Volunteer registration 2018: Confirmation of registration

100% Complete

✔ Confirmation of registration

Thank you for your interest in the Community Volunteer Income Tax Program.
A CRA coordinator will contact you, if necessary.

You must now obtain or renew an EFILE number to electronically file income tax returns, if you have not already done so. To obtain or renew an EFILE number, go to www.efile.cra.gc.ca.

If you have questions concerning your need to get an EFILE number, contact your community organization.
