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VOLUNTEER APPLICATION FORM

City of Dallas, Human Resources 187 SE Court Street, Dallas, Oregon 97338

DIRECTIONS: Answer each question as completely as possible. If a question is not applicable to you, write NA (not applicable). If additional space is needed, attach a supplemental sheet.

APPLICANT INFORMATION					
NAME (LAST, FIRST, MIDDLE)				
ADDRESS (STREET, SIT) (ST	FATE 710)				
ADDRESS (STREET, CITY, ST	ATE, ZIP)				
DAYTIME PHONE	EVENING PHONE	EMAIL			
DAY HIVE PHONE	EVENING PHONE	EMAIL			
DATE OF BIRTH (some positions require a minimum age; DOB is only used to match appropriate volunteer positions)		DRIVER LICENSE NUMBER AND STATE			
ARE YOU UNDER 18 YEARS OF AGE? IF YES, PARENT/GUARDIAN MUST COMPLETE THE FOLLOWING: I,, give my permission for to volunteer for the City of Dallas. Signature of Parent/Guardian:					
EMERGENCY CONTACT INFO	DRMATION (REQUIRED):				
Name:		Phone(s):			
Relationship:					
I HAVE READ THE POSITION WITHOUT AN ACCOMODATION	• •	PERFORM THE TASKS OF THE POSITION WITH OR			
HAVE YOU EVER BEEN CONVICTED OF A CRIME? YES NO					
IF YES, PLEASE EXPLAIN FULLY BELOW: (EXCLUDE THOSE CASES PROCESSED IN JUVENILE COURT AND MINOR TRAFFIC VIOLATIONS). CONVICTION DOES NOT NECESSARILY DISQUALIFY YOU FROM A VOLUNTEER POSITION.					

E	DUCATION, EMPLOYM	ENT, AND EXPERI	ENCE	
EDUCATIONAL BACKGROU	ND:			
High School:		Location:		
College: Year Completed :		Location: Degree:		
		Degree.		
EMPLOYMENT	Lam raticad □	I am ampleyed/aulf ample	oved I am a student I	
I am not employed □	ram retired 🗆	r am employed/sell-empl	oyed □ I am a student □	
VOLUNTEER EXPERIENCE	I have never volunteered	I have volunteer experier	nce (please describe):	
PLEASE DESCRIBE YOUR E	EXPERIENCE WORKING WITH	THE PUBLIC:		
	VOI UNTER	ASSIGNMENT		
SKILLS:	VOLONILLIN	AGGIGINILITI		
What skills do you have that w	rould be helpful in our organization	on? (clerical, computer, for	eign language, etc.)	
What training would you like to	receive from this volunteer pos	ition?		
AVAILABILITY:				
What days/times are you ava		Friday D.Marrian D.A	Hamasan - El Espaina	
Monday: ☐ Morning ☐ After Tuesday: ☐ Morning ☐ After		Friday: ☐ Morning ☐ Afternoon ☐ Evening Saturday: ☐ Morning ☐ Afternoon ☐ Evening		
Wednesday: ☐ Morning ☐ Arte		Saturday: ☐ Morning ☐ Afternoon ☐ Evening Sunday: ☐ Morning ☐ Afternoon ☐ Evening		
Thursday: ☐ Morning ☐ After	-	Sunday. Li Monning Li	Alternoon in Evening	
Which volunteer position(s)	are you interested in?			
☐ Aquatic Center Junior Lifegr	•	□ Dallas Library Volunteer		
☐ Aquatic Center Water Aerol		□ Park Volunteer		
Uvolunteer in Policing (VIP)		☐ Special Event:		
☐ Other (please explain):				
Davagnal Dafayanaa (nat		ENCES		
Personal Reference (not a	•			
NAME AI	DDRESS	TELEPHONE #	RELATIONSHIP	
Volunteer or Paid Work R	eference:			
NAME A	DDRESS	TELEPHONE #	RELATIONSHIP	

RELEASE AND ACKNOWLEDGEMENT

I hereby certify that this application contains no misrepresentations or falsifications and that the information given is true and complete to the best of my knowledge and belief. I authorize the City of Dallas to take any necessary and appropriate investigations to verify the information I provide in my employment application and to investigate my personal and professional background, including any criminal records and past employment records. I also release the City of Dallas and any persons, companies, or corporations supplying the above information from all liability pertaining to information concerning my background.

I acknowledge that the City of Dallas will not provide health or accident insurance for my benefit and that I am responsible for providing my own health or accident insurance. I understand and agree that I or my estate will be responsible to pay any and all costs incurred as a result of injury, illness, or death suffered while participating as a volunteer or intern. This acknowledgement and agreement will be binding on my and my heirs, personal representatives, and successors.

Completing this form is not a guarantee of placement. I understand that as a volunteer I am not an employee of the City of Dallas and that any duties that I perform are as a volunteer. I agree to follow the procedures and guidelines set forth by the City of Dallas for my assigned work duties.

SIGNATURE:	DATE:		
For Office Use Only			
Date Received:			
Staff Assigned:			
Volunteer Position:			