****

Volunteer Application

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name | |  | | | | | | | | | | | Social Security No. | | | | | | |  | | | | | | | | |
| Mailing Address | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Business Address | | | |  | | | | | | | | | | | | | | | | | | | | | | | | |
| Area Code/Home Phone | | | | | |  | | | | | Area Code Business Phone | | | | | | | | |  | | | | | | | | |
| Sex |  | | | | Marital Status | | |  | | | | | | Date of Birth | | | | | |  | | | | | | | | |
| Present Occupation | | | | |  | | | | | Working Hours | | | |  | | | | | Does Job Require Travel | | | | | | | |  | |
| Highest Grade Level or Education Completed | | | | | | | | | |  | | | | | | | | | | | Degree Acquired | | | | | |  | |
| Other Training | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Special Qualifications (Skills, Hobbies, Interests, Talents, Inc,) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Previous experience that would help in volunteer work: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Type of Volunteer Service that interests you (Counseling, Clerical, Administrative, Etc.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| How much time can you volunteer? | | | | | | |  | | | Hours (Weekly or Monthly) | | | | | | | |  | | | AM | |  | | PM | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| How long can you commit yourself as a volunteer? | | | | | | | | | | | | 1-3 months | | |  | | 3-6 months | | | | |  | Longer | | |  | | |
|  | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
| Do you have a criminal record (juvenile or adult)? | | | | | | | | | | | |  | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| References | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | | | | | | | |
| Name | | | | | | | | | Address | | | | | | | | | | | | | | | Phone | | | | |
|  | | | | | | | | |  | | | | | | | | | | | | | | |  | | | | |
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| I hereby certify that all statements made on this application are true. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Signature | | |  | | | | | | | | | | | | | Date | | | |  | | | | | | | | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Assignment to be completed by appropriate authority. | | | | | | | | | | | | | | | | | | | |
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|  | | | | | | | | | | | | | | | | | | | |
| 1. Process Area | | | |  | | | | | | 5. County | |  | | | | | | | |
| Department of Commerce | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | |
| 2. Process Unit | | | | |  | | | | | 6. City | |  | | | | | | | |
|  | | | | | | | | |  |  | | | | | | | | |  |
|  | | | | | | | | | |
| 3. Section | |  | | | | | | | | 7. Comparable Career Service Class | | | | | | |  | | |
|  | | | | | | | | |  |  | | | | | | | | |  |
|  | | | | | | | | | |
| 4. Subsection | | |  | | | | | | | 8. Position Number | | | | | Budget Number | | | | |
|  | | | | | | | | |  |  | | | | |  | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| 9. Previous Volunteer Service to COM (Within Calendar Year) | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| From |  | | | | | | | | | To |  | | | | | | | | |
|  |  | | | | | | | | |  |  | | | | | | | | |
| From |  | | | | | | | | | To |  | | | | | | | | |
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| From |  | | | | | | | | | To |  | | | | | | | | |
|  |  | | | | | | | | |  |  | | | | | | | | |
| From |  | | | | | | | | | To |  | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| 10. Dates of This Assignment: | | | | | | From |  | | | | | To |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | |
| Part Time | | | | | | | |  | | Full Time | |  | | Hours Per Week | | | |  | |
|  | | | | | | | | | | | | | | | | | | | |
| 11. Type Volunteer Assignment | | | | | | Regular Service | | | | Occasional Service | | | | | | Material Donor | | | |
|  | | | | | | | | | | | | | | | | | | | |
| 12. Duties and Responsibilities, or Funds, Materials, Employment or Opportunities Provided. | | | | | | | | | | | | | | | | | | | |
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| 13. Authorized Signature |  | Title |  | Date |  |