



# **Application for Volunteer Position**

#### **INSTRUCTIONS**

Each question should be fully and accurately answered. Please print or type, except for the signature on the back of the application.

## **VOLUNTEER APPLICATION INFORMATION**

Name:					
Address:					
E-mail Address:					
Telephone Number: (home/cell)	_ (business) _				
Date Available for Volunteer Work:					
Are you interested in one-time or short-term volunteer ass	ignments?	□ yes	🗆 no		
Are you interested in on-going volunteer assignments?		□ yes	🗆 no		
Are you age 18 or older? $\Box$ yes $\Box$ no $\Box$ If no, please list date of birth:					
If you are applying for a volunteer position which requires driving, do you possess a valid driver' license? yes no If yes, Driver's License #: Have you volunteered for the City of Fort Collins before? yes no If yes, please list Department, responsibilities and approximate dates:					
					Do you now have pending or have you ever been convicted deferred judgment, or a deferred prosecution for a petty of (excluding civil traffic infractions), municipal code violation misdemeanor, or felony, or been adjudicated as a juvenile yes no
If yes, please state the offense(s) that are pending or you explain the date, location, nature and facts surrounding ea		d for or conv	victed of and		
EMPLOYMENT AND VOLUNTEER HISTORY Please list your present or most recent employment or vol Name of Business or Organization:					
Address of Business or Organization:					
Name of Supervisor: Telep	of Supervisor: Telephone No				
Responsibilities:					
Worked with them from: to:					
Paid Employment?  yes  no Volunteer Wo	ork? 🗆 y	res 🗆 no	)		

#### **EDUCATION AND SKILLS**

Please list any education, vocational, technical or military training information the is relevant to the position for which you are applying:

Additional Skills?	 	
Computer?	 	
Foreign Language?	 	
Additional Information?	 	

#### **CERTIFICATION AND RELEASE**

I certify that all statements made in this application are true and complete. I authorize the City to investigate all statements made as a part of this application and to secure any necessary information from all prior employers, volunteer programs, references, academic institutions, law enforcement agencies, other persons and entities, and public records. I hereby release all such persons, entities, employers, volunteer programs, references, institutions, agencies and the City from any and all liability arising from their giving or receiving information about my employment history, academic credentials, qualifications, reputation, driving record, and criminal record. A photocopy of this release can be used for all purposes.

I understand that any false answers or misleading statements as well as misrepresentations by omission made by me as part of my application, will be sufficient for rejection of my application or for my immediate discharge should one be discovered after I have started volunteer activities.

I understand that nothing in this volunteer application, in the City's statement of personnel policies or in my communication with any City employee or official is intended to create an employment contract between the City and me. Accordingly, either I or the City may terminate my volunteer status at-will at any time with or without cause or notice. I understand that the at-will nature of the volunteer relationship can only be changed in a specific writing signed by the Director of Human Resources. I understand that I will not be paid or receive any other remuneration for my services as a volunteer with the City.

I understand that successful completion of a background check is a qualification to work in certain programs.

I hereby acknowledge that I have read, understand, and agree to the preceding statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### PARENTAL CONSENT FOR APPLICANTS UNDER 18 YEARS OF AGE

As the parent or guardian of the above volunteer applicant, I hereby consent to his/her participation as a volunteer for the City of Fort Collins.

Printed Name of Parent or Guardian	Date
Signature of Parent or Guardian	Phone