

# Volunteer Application

## GENERAL INFORMATION

Application Date \_\_\_\_\_  Adult  Teen

Are you 18 years or older?  Yes  No

Best way to contact you:  Home Phone  Work Phone  Email

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_

Nickname \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_

## EDUCATION AND WORK EXPERIENCE

Current Employer \_\_\_\_\_

Work Phone \_\_\_\_\_

Position Responsibilities \_\_\_\_\_

Students - List School \_\_\_\_\_ Last Grade Completed \_\_\_\_\_

Previous Volunteer Experience \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## INTERESTS

Hobbies/Interests \_\_\_\_\_

Skills/Languages Spoken \_\_\_\_\_

What is motivating you to volunteer?

Personal satisfaction  Career exploration  School/community service requirements  Other

Additional Information \_\_\_\_\_

\_\_\_\_\_

**VOLUNTEER WORK PREFERENCE**

- Adult Center       General Clerical       Marketing/Publicity       Miller Park Zoo
- Pepsi Ice Center       S.O.A.R.       Aquatics       Inclusion Companion
- Park or Trail       Recreation Programs       Special Events       Miller Park Summer Theatre
- Sports       Preschool/Youth       Other \_\_\_\_\_

**REFERENCES**

**References:** We reserve the right to check references on all potential volunteers. Please list two people other than relatives who would be willing to serve as personal references who have known you for at least one year.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**General Information:** Affirmative responses to the following questions will not automatically exclude you from volunteering.

Have you ever been dismissed or asked to resign from any position for reasons other than disability? No  Yes

**If yes, please explain:**

Have you ever been convicted of a felony? No  Yes

**If yes, please explain:**

- I hereby certify that the information provided above is true and complete and to the best of my knowledge.
- I authorize the City to thoroughly investigate my references, work record, education, criminal convictions record, and any other matters relevant to my suitability for volunteering. I hereby fully release and discharge the City, my former employers, their respective officers, employees and agents, and all other persons and entities from any and all claims, demands, and liabilities arising out of or in any way relating to such investigation or disclosure.
- I understand that I will not be paid as a volunteer.
- I understand that I will serve at the pleasure of the City of Bloomington and may be dismissed from my volunteer duties at any time, with or without cause. A volunteer may not be selected for volunteer service. This determination may be made with or without cause.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

If volunteer is under 18 years of age, a parent or guardian must consent to an applicant's working as a volunteer. I hereby consent to my child's participation in the Bloomington Parks and Recreation volunteer program.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date

**Please return to: Bloomington Parks & Recreation, 115 E. Washington, Bloomington, IL 61701**