

Adult Volunteer Application

Received: Replied: Assignment:

Name:	Last	First	Middle Initial
Number Street		Apt. No. City	State Zip Code
Address:			
Home Phone	Work Phone	California Drivers Licer	se # Class: Exp. Date
()		I d C10	M d 1D (P'd/(' 1)
Email Address:		I am over the age of 18. ☐ Yes	Month and Day of Birth (optional)
		103	Day Evening
Emergency Name:		Phor	
Contact:		City	Zip
Address:			
Please answer the following questions. If the answer to any of the questions is YES, please give details to the right.			
Do you have a disability wl	nich may limit your ability	Yes No	
to perform the job for which	h you have applied		
2. Have you, as an adult, been convicted of a violation of the law,			
excluding minor traffic violations? A fingerprint check may be made. A YES answer will not automatically disqualify you.			
3. Have you ever been dischar		пп	
4. Have you ever worked for t			
EDUCATION: Check the highe	st grade 1 2		7 8 9 10 11 12 or more
you completed:			
High School Graduate Yes No Passed High School Equivalency Tests Yes			
Completed Name and Location of College or University Major Subject(s) Semester Units Quarter Units Degree			
Traine and Becauter of correspond	. Charter stay	. suejeen(s) semest	granter omis Dog.co
Certificate of Training, Licenses or Professional Registration			
WORK EXPERIENCE: Are you presently employed? (Check as many as apply)			
☐ Employed full-time ☐ Employed part-time ☐ Temporarily unemployed			
Full-time student	Part-time st	udent	Looking for work
CURRENT EMPLOYER OR SCHOOL:			
Name			
Address			Phone
Job Title or School		Position or Maj	or
PREVIOUS WORK EXPERIENCE:			
Reference:			
PREVIOUS			
VOLUNTEER JOBS			
Reference: WHAT TYPE OF VOLUNTEER JOB ARE			
YOU MOST INTERESTED IN			
	GOALS FOR A VOLUNTEER		
JOB? (e.g., gain school credit, w			
Times Available: M]T	Special Events: Evenin	
Length of Assignment Desired:	☐ 3 mos. ☐ 6 mos.	☐ 6-12 mos. ☐ More	han year Spot jobs Special Projects
	inguage		Read Speak Write Read Speak Write
(other than English) Language Read Speak Write CERTIFICATION/PHOTO RELEASE:			
I hereby certify that all statements made in this application are true and I authorize investigation of all matters contained in the application. I acknowledge that any false			
statements or misrepresentation on this application will be cause for refusal of placement or immediate dismissal at any time during the period of my placement. I am			
aware that fingerprinting and a background investigation will be required before placement in the Police or Fire Departments, and for any sensitive volunteer position. I agree to authorize the City of Fremont to utilize any photographed or video graphed images of myself in brochures, flyers, displays or other promotion purposes without			
any compensation from the City.			
Signature of Applicant:			Date: