



CITY OF CHINO
COMMUNITY VOLUNTEER CORP
APPLICATION

2014

Thank you for your interest in the City of Chino's Volunteer Program. Knowing your skills, interests and availability will help us find the best assignment for you. Please complete Part One of this application as completely as possible. Part Two is not required for Special Event/One Day or Special Project Volunteers. As required by State law and City policy, all volunteers will be required to submit their fingerprints to the Chino Police Department and receive clearance by the California State Department of Justice before the first day of the volunteer service.

PART ONE (Please type or print and complete as much as possible)

NAME: Last First MI

ALSO KNOW AS (AKA): Last First MI

ADDRESS: Street City Zip Code

TELEPHONE: Home Work Cell or Message

DRIVER'S LICENSE #: EXPIRATION: DATE OF BIRTH (DOB):

Person to contact in case of an emergency: Telephone:

Have you volunteered for the City of Chino before this? Yes No If yes, when?

Have you ever been convicted of any crimes other than minor traffic citations? Yes No

List and discuss any convictions. Each case is considered on its own merits.

NOTE: This question seeks information on any conviction from any point in your life (This includes conviction as a minor) even if the conviction was removed from your record. Failure to accurately respond to this question shall result in either your rejection from volunteer service or dismissal.

Area of Interest: (Please check appropriate box and see Volunteer Opportunities Listing for descriptions.)

- Administration: TV Camera Operators, Clerical Aide
Community Development: Administration Aide, Code Enforcement, Housing Aide
Community Services: Administration, After School Programs, Youth Sports, Chino Youth Museum, Community Outreach and Recreation, Counseling Interns, Senior Services
Finance: Purchasing / Warehouse, Utility Billing Aide
Human Resources: Administration Aide
Police: Chino Police Chaplain, Explorers, Mounted Posse, Community Support Team, A.C.E.S. - Ham Radio
Public Works: Engineering Intern, Clerical Aide

Type of Volunteer Service: (Please check appropriate box.)

Regular/Ongoing, Internship, Special Event/One-Day, Special Project, School Project, Scout Project

Are you a relative of anyone currently affiliated with the City of Chino? Yes No

Name of Individual: Relationship:

Are there any medical or physical conditions that may require special accommodations? Yes No

If yes, please specify.

I understand that I am providing volunteer service to the City of Chino and as such am not entitled to compensation or benefits otherwise offered to employees of the City of Chino. My services are offered freely, without direct or indirect pressure or coercion from any representative of the City.

I certify that all statements made in the Application are true and complete and I authorize investigation of all matters contained. I agree and understand that any misrepresentation or omission of a matter of fact may be justification for rejection of my application.

As a condition of my volunteer service with persons who are receiving services or other assistance from the City of Chino, I agree not to divulge any information regarding these persons. The unauthorized release of confidential information is a violation under state law.

Signature: Date:

Signature of Parent or Legal Guardian (if under age 18) Date:

PART TWO (2) - Please complete if you plan to be an ongoing volunteer, intern or school project volunteer. (Not required for Special Event/One-Day or Special Project Volunteers. Special Project Volunteers may volunteer once a quarter for no more than 8 hours.)

Please fill out all applicable sections.

Please briefly describe why you are interested in volunteering for the City of Chino.

Availability

Date available to start: _____ Hours available per week: _____

Check days available: *Monday* *Tuesday* *Wednesday* *Thursday* *Friday* *Saturday* *Sunday*

Preferred hours: Morning Afternoon Evening Specific Hours _____

Education

Check highest grade completed. High School: 9th 10th 11th 12th more
 College: 1st 2nd 3rd 4th

Please list any institutions attended and degrees, certifications, or credentials that may be relevant.

School / College *Major Subject (s)* *Degree*

Foreign Languages:

_____ *Speak* _____ *Read* _____ *Write*
 _____ *Speak* _____ *Read* _____ *Write*

Specialized Skills / Training: (i.e.. clerical, computer, drafting, graphic design, carpentry, painting, research procedures, social services, etc.)

Experience: Please describe any relevant work or volunteer experience.

Personal / Work References

Name *Address* *Phone* *Relationship/Association*

Please return this application to the department you applied with or:

<p><u>In person to City Hall</u></p> <p>City of Chino Administration Department (2nd Floor) 13220 Central Avenue Chino, CA 91710</p>	<p><u>Send by Mail</u></p> <p>City of Chino Administration Department P.O. Box 667 Chino, CA 91708-0667</p>
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For additional information, please call Donna De Bie, Volunteer Coordinator at (909) 464-0738 or leave a message on the information line at (909) 590-5515 or by email at volunteers@cityofchino.org.

▼ Thank you for your interest! ▼