



Town of Oro Valley Volunteer Program
VOLUNTEER APPLICATION

Last Name:* _____ First Name:* _____ Initial: _____

Address:* _____ City:* _____ State:* _____

ZIP Code:* _____ Email: _____

Home Phone:* _____ Cell Phone: _____

Birth Date:* _____ Driver's License:* _____ State:* _____

Occupation: _____ Employer: _____

Work Phone: _____

Emergency Contact:* _____ Relationship:* _____

Day Phone:* _____ Evening Phone:* _____ Cell Phone: _____

Are you related to a Town employee or an elected/appointed Town official?*

Yes No If yes, who? _____ Department: _____

Do you know any Town employee or elected/appointed Town official?*

Yes No If yes, who? _____ Department: _____

Have you ever been convicted of or pled guilty to any crime(s) (felony or misdemeanor)?

*(Applicants are not required to report convictions that have been expunged or sealed by a court of law)**

Yes No

If yes, describe each in full:

A prior conviction will not automatically disqualify you from volunteering with the Town of Oro Valley. A false or incomplete answer may be grounds for not placing you or for dismissing you after placement. Failure to report arrests or convictions at any time during the term of your relationship with the Town may render you ineligible to volunteer.

What special skills/certification/training or interests would you like to share?*

Describe relevant volunteer or work experience. Include reference name and address.*

Why are you interested in volunteering?

Do you speak/read/write in a language other than English?

Yes No Identify the language and your skill level: _____

WHEN ARE YOU AVAILABLE TO VOLUNTEER

| | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|---|--------|---------|-----------|----------|--------|----------|--------|
| Morning | | | | | | | |
| Afternoon | | | | | | | |
| Evening | | | | | | | |
| I can start (date) _____ No. hours per day _____ No. days per week _____ No. days per month _____ | | | | | | | |

IN WHAT AREAS ARE YOU INTERESTED IN VOLUNTEERING? Check all that apply*

| | | |
|--|--|---|
| <input type="checkbox"/> Administrative/Clerical Assistant | <input type="checkbox"/> Technology Assistants | <input type="checkbox"/> Parks |
| <input type="checkbox"/> Receptionist | <input type="checkbox"/> a) Network Experience | <input type="checkbox"/> Recreation |
| <input type="checkbox"/> Drivers | <input type="checkbox"/> b) Graphics | <input type="checkbox"/> Library |
| <input type="checkbox"/> a) Transit (Coyote Run - seniors) | <input type="checkbox"/> c) Scanning | <input type="checkbox"/> Education/Outreach |
| <input type="checkbox"/> b) Fleet Maintenance | <input type="checkbox"/> d) Web Design | |
| <input type="checkbox"/> Police Department (CVAP) | <input type="checkbox"/> e) Data Entry | |
| <input type="checkbox"/> | | |

By my acceptance below, I certify that all statements made in this application are true and correct and that any false statements, misrepresentation, or omissions in the application may disqualify me for placement or result in dismissal at any time. I give permission for the Town of Oro Valley to conduct a background check on me, which may include a review of sex offender registries, MVD license check, fingerprinting, child abuse, criminal history records and substance abuse testing. I understand that, if appointed, my position is conditional upon the Town receiving no inappropriate information on my background. I hereby release and hold harmless from liability the Town of Oro Valley, its officers, agents, employees and volunteers, or any other person or organization that may provide such information. I further agree to release, hold harmless and indemnify the Town of Oro Valley, its officers, agents, employees and volunteers, from any and all liability or claims of injury or damages of any nature which may be incurred by me as a result of my voluntary participation in the Town volunteer program.

I understand and agree that I am providing volunteer services hours for personal, civic, charitable, or humanitarian reasons, without promise, expectation, or receipt of compensation for services rendered. I am offering my services freely and without pressure or coercion; and am not otherwise employed by the Town of Oro Valley to perform the same type of services as those for which I will be volunteering.

I hereby grant and convey to the Town of Oro Valley all right, title, and interest in and to any and all written work product, photographic images and video or audio recordings made by or for the Town of Oro Valley during the volunteer's activities, including but not limited to, any royalties, proceeds or other benefits derived from such writings, photographs or recordings.

Due to the number of applicants received in relation to the number of volunteer opportunities available that match any given skill set, the Town of Oro Valley may not be able to place all interested volunteers and is under no obligation to do so, however, you will be notified of your status. I understand that the Town of Oro Valley is under no obligation to accept all interested volunteers. The Town reserves the right to terminate your volunteer assignment at any time or for any reason.

The Town of Oro Valley does not discriminate against any applicant because of race, color, religion, national origin, age, marital status, sexual orientation, disability, or any other reason prohibited by law.

Signature of Volunteer Applicant

Date

Thank you for filling out an application to volunteer your time in our own offices. We appreciate your willingness to give back to your community. Someone will call you in the next few weeks to confirm your information.

Please return to: **Town of Oro Valley**
Volunteer Coordinator
11000 N La Cañada Dr
Oro Valley, AZ 85737

*indicates required fields.

**used for background checks