

## **Volunteer Application**

Please fill out the form below completely. Anything that is not a required field may be left blank. All information provided in this application and on this secure site including the results of any background investigation will be under the control and security procedures of the Buhler Recreation Commission.

### Fields marked with a red asterisk (\*) are required.

<b>Contact Informat</b>	cion			
First Name: *	M	l.:	Last Name	e: *
Other Name Used	<u> </u>			
Address: *	City: *_		State: *	Zip Code:
Phone Number: *_		Email:*		
Are you 18 years o	of age or older:*	YES NO		
•	•			ompleted by a parent or omplete the application
Preferred Method	of Contact:	Pref	erred Contact Tim	ne:
Employer:		_Occupation:	Wo	ork Phone:
Please indicate are role for you:	eas of interest, specia	al skills/trainings, c	or any other detail	s that may help us find a
When are you avai availability. □ One time	ilable to volunteer? C □ Short term		or as many as are	
<ul><li>☐ One time</li><li>☐ Once per montl</li><li>☐ Holidays</li></ul>		<ul><li>□ Long term</li><li>□ Weekends</li><li>□ Special Events</li></ul>	$\square$ Daytime	☐ Once per week☐ Evenings ☐ School Days



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Other Information Have you ever been convicted of a criminal offense?	☐ YES	□NO	
A conviction will not necessarily bar participation with			nteer program but will
be considered within the context of the entire applica		ation commissions void	nteer program, but will
A current Tetanus vaccination is recommended in	າ order to perforr	n volunteer work.	
Please read the following statement and indicate	agreement at th	e end of the statement.	
YOU WILL NOT BE ABLE TO SUBMIT YOUR APPLICA VOLUNTEER UNLESS YOU AGREE TO THE FOLLOWIN MAY BE REQUIRED TO FILL OUT ADDITIONAL DOCU	NG STATEMENT A		
l agree not to consume, use, possess, or be under volunteering for the Buhler Recreation Commission		any drug or alcohol prod	lucts while
l understand that any conduct or pattern of condigeopardize public trust in the Buhler Recreation C		<del>-</del>	or otherwise
I understand that depending upon the nature of to deem it necessary to obtain a Driver's License Recool volunteering for the Buhler Recreation Commission make any requests for a Driver's License Record a relinquish, and remise the Buhler Recreation Com and all causes of action or liabilities which I may hauthorized. Furthermore, I understand that my fabeing further considered for employment or volunt	cord and/or a Crii on. I hereby cons and/or a Criminal nmission, its emp have or which ari ailure to execute	minal Background Check ent to the Buhler Recrea Background Check on n loyees, agents, and repr se out of, or as a result o	c on individuals ation Commission to ne. I release, resentatives, from any of, the reports herein
I understand that my volunteer assignment with time. Reasons for termination may include, but a record or criminal background check or terminati	re not limited to,	anything that might be	_
I acknowledge that volunteer photographs may b publications, promotional and educational mater	_	ble use in: news release	s, internal
Unless I specifically indicate my desire to work wi indicated on the application, I may be asked to pe my knowledge I have answered everything on this intended to deceive or commit fraud or made any will be kept on file for 1 year.	erform any type o s application trui	of volunteer work that is chfully and have not give	s needed. To the best o en any information
Signed:	Dat	e:	



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### **FOR OFFICE USE ONLY**

Type of Volunteer Activity:		
Working with Kids Under 18?	□Yes	□No
Background Check Needed?	□Yes	□No
If Yes, Date Approved:		
Driver's License Check Needed?	□ Yes	□No
If Yes, Date Approved:		
Volunteer Application:	☐ Approved	☐ Denied