



CITY OF DOUGLAS

Application for Volunteers and Interns

An Affirmative action and equal opportunity employer.

The City of Douglas does not discriminate on the basis of race, color, religion, sex (including pregnancy and sexual harassment), national origin, disability, age, sex (wages), genetics and retaliation; or any other characteristics protected by state or federal law, in its employment practices, programs or operations.

Personal Information			
Name: _____			
Address: _____	City: _____	State: _____	Zip Code: _____
Home Phone: _____	Work Phone: _____	Cell Phone: _____	
Email: _____			
Why are you interested in volunteering? <input type="checkbox"/> Personal interest <input type="checkbox"/> Educational Internship			
<input type="checkbox"/> Community Service Hours <input type="checkbox"/> Court ordered <input type="checkbox"/> Other _____			
Age: Please check _____ over 15 _____ under 14			
Have you ever worked or do you currently work for the City of Douglas?			
Do you have a valid driver's license?			
Experience and Education			
What is your educational/training background?			
Current or most recent employer:			
Have you had any previous experience as a volunteer? If so, with what organizations, and what kind of work did you do?			
<input type="checkbox"/> Current Volunteer <input type="checkbox"/> Other <i>Please specify</i> _____			
How long can you commit to volunteering? <input type="checkbox"/> One time <input type="checkbox"/> Occasionally <input type="checkbox"/> 3-6 months			
<input type="checkbox"/> 6 months or more <input type="checkbox"/> Other _____			
What days are you available? <input type="checkbox"/> Mondays <input type="checkbox"/> Tuesdays <input type="checkbox"/> Wednesdays <input type="checkbox"/> Thursdays <input type="checkbox"/> Fridays			
<input type="checkbox"/> Saturdays <input type="checkbox"/> Sundays			
What times are you available? <input type="checkbox"/> Mornings <input type="checkbox"/> Afternoons <input type="checkbox"/> Evenings			

Do you prefer to work (check all that apply) <input type="checkbox"/> Directly with people served <input type="checkbox"/> Behind the scenes <input type="checkbox"/> Computers <input type="checkbox"/> Maintenance <input type="checkbox"/> No preference
Hobbies/interests:
Skills you would like to use while volunteering:

Other languages you speak _____ Basic Conversational Fluent
 _____ Basic Conversational Fluent

Do you have any special needs or restrictions we should be aware of?:

Date you can begin service: _____

Criminal History

All volunteer positions require a Criminal History check. Conviction will not necessarily disqualify you from participating. Have you ever been convicted of a felony? Yes No
 If yes, explain.

Please describe in 3-5 sentences why you want to be a volunteer or intern with the City of Douglas:

Why, at this particular time in your life have you chosen to volunteer with us? What do you hope to gain from being a volunteer?

City of Douglas provides reasonable accommodation to qualified individuals with disabilities when it would not be an undue hardship. If you need a reasonable accommodation in the pre-placement process, please contact the Volunteer Manager.

AUTHORIZATION AND AGREEMENT BY APPLICANT	
1. I certify that the facts set for in this volunteer application are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in my application or placement interview may result in the rejection of my application or discharge from the volunteer program.	
2. I consent to having City of Douglas complete a criminal background check prior to volunteering.	
3. I agree to complete a drug screening and TB screening requirements relevant to the position for which I am applying	
_____	_____
Signature of Applicant	Date
_____	_____
Parent/Guardian Signature (required if less than 18 years of age)	Date