



**City of Huntington Beach/Community Services Department
Volunteer Application**

Personal Data

| | | | | | |
|----------------|----------------|--------|------------------------|--------------------|-----|
| LAST NAME | | FIRST | MI | CA DRIVERS LICENSE | |
| ADDRESS | | STREET | | APT # | |
| E-MAIL ADDRESS | | CITY | | STATE | ZIP |
| DATE OF BIRTH | | GENDER | | | |
| HOME TELEPHONE | CELLULAR PHONE | | EMERGENCY NOTIFICATION | | |
| NAME | | PHONE | | | |
| RELATIONSHIP | | | | | |

Former or Current Employment Data (*Required)

| | | | | | |
|------------------------|--|-------------------|--|---------------------|-----|
| EMPLOYER | | OCCUPATION | | DATES OF EMPLOYMENT | |
| ADDRESS | | STREET | | APT # | |
| TYPE OF WORK PERFORMED | | CITY | | STATE | ZIP |
| TELEPHONE | | RETIRED: YES / NO | | | |

Volunteer History

| | | | | | |
|-----------------------|--|-----------|--|------------------|--|
| BUSINESS/ORGANIZATION | | TELEPHONE | | DATES OF SERVICE | |
| DUTIES PERFORMED: | | | | | |
| BUSINESS/ORGANIZATION | | TELEPHONE | | DATES OF SERVICE | |
| DUTIES PERFORMED | | | | | |

Other Skills

| | | | | | |
|---------------------------------------|--|--|--|--|--|
| LANGUAGES SPOKEN (OTHER THAN ENGLISH) | | | | | |
| COMPUTER SKILLS | | | | | |
| HOBBIES | | | | | |
| OTHER TRAINING OR SKILLS | | | | | |

REFERENCES

LIST NAMES AND ADDRESSES OF PEOPLE, OTHER THAN RELATIVES, THAT WE MAY CONTACT WHO HAVE KNOWLEDGE OF YOUR JOB SKILLS, EXPERIENCE, AND ABILITY. YOU MAY USE PAST EMPLOYERS

| NAME | EMAIL | TELEPHONE | BUSINESS OR OCCUPATION |
|------|-------|-----------|------------------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |

CONTINUE ON BACK

PLEASE CHECK THE VOLUNTEER OPPORTUNITY THAT INTERESTS YOU

| | |
|---|---|
| _____ CARE MANAGEMENT (FRIENDLY VISITOR, MONEY MENTOR, HANDY MAN) | _____ HOME DELIVERED MEALS |
| _____ COMMUNITY AMBASSADOR | _____ OFFICE SUPPORT: CONCIERGE, MEALS, RECREATION, RESOURCE, TRANSPORTATION, WELLNESS PAVILION |
| _____ EVENTS | _____ SENIOR CENTER CLASSES OR ACTIVITIES: (E.G. BINGO, DANCE, COMPUTERS) |
| _____ FITNESS CENTER | _____ SENIOR SERVE LUNCH PROGRAM |
| _____ FOOD DISTRIBUTION | _____ OUTLOOK ASSEMBLY |
| _____ HBCOA BOARD OR COMMITTEE | _____ TRANSPORTATION DRIVER/ ESCORT |
| _____ HANDY CRAFTER | _____ OTHER _____ |

AVAILABILITY

THE MAJORITY OF VOLUNTEER OPPORTUNITIES ARE AVAILABLE MONDAY THRU FRIDAY FROM 8 AM TO 5 P.M. ARE YOU AVAILABLE TO VOLUNTEER DURING THAT TIME?

YES NO

Agreement

1. I WILL NEVER ACT UNPROFESSIONALLY WHILE REPRESENTING THE CITY OF HUNTINGTON BEACH OR PERFORM ANY CONDUCT WHICH WOULD BRING DISCREDIT UPON THE CITY.
2. I WILL NEVER USE OR ATTEMPT TO USE CITY OF HUNTINGTON BEACH INSIGNIA, BADGE, DECAL, PLAQUES, STICKERS OR CITY ISSUED EQUIPMENT OR ANY ARTICLE GIVING REFERENCE TO CITY OF HUNTINGTON BEACH INAPPROPRIATELY.
3. I WILL PROVIDE NO FALSE OR MISLEADING INFORMATION ON THIS APPLICATION OR AT ANY TIME DURING MY SERVICE.
4. I WILL ALWAYS TREAT MY FELLOW WORKERS, CITY OFFICIALS, CITY EMPLOYEES, AND MEMBERS OF THE COMMUNITY WITH RESPECT AND DIGNITY.

I WILL FOLLOW RULES AS STATED.

I UNDERSTAND THAT AS A VOLUNTEER FOR THE CITY OF HUNTINGTON BEACH COMMUNITY SERVICES DEPARTMENT, WORKING DIRECTLY WITH CHILDREN OR FRAIL, HOMEBOUND SENIORS, I WILL BE REQUIRED TO SUBMIT MY FINGERPRINTS TO THE CALIFORNIA DEPARTMENT OF JUSTICE FOR BACKGROUND CHECK.

SIGNATURE: _____ **DATE:** _____

Attachments Required: Copy of Driver's License or photo identification

Application Certification: PLEASE READ BEFORE SIGNING. I CERTIFY the statements made by me in the application are true, complete, and correct to the best of my knowledge and belief. I understand that statements made are subject to verification and that any misrepresentation, fraud, or omission of material facts may be grounds to reject my volunteer application.

SIGNATURE _____

DATE _____

**Return this application to:
City of Huntington Beach Senior Center in Central Park
18041 Goldenwest St
Huntington Beach, CA 92648**