



Appendix A

Volunteer Application Form

Personal & Contact Information	
Name	
Address	
Phone Number	
Email Address	
Volunteers under the age of 19 must provide a parent or guardian signature	
Age (ONLY if under 19)	
Parent/Guardian Signature (ONLY if under 19)	

Availability	
Please list the times you are available to volunteer each day. If you are not available on a day, please leave it blank. The City's hours of operation are provided in parentheses. The other comments section is available if specific dates are desired.	
Monday (8am-5pm)	
Tuesday (8am-5pm)	
Wednesday (8am-5pm)	
Thursday (8am-5pm)	
Friday (8am-5pm)	
Other Comments:	

Purpose	
Are you interested in a long-term volunteer position, or are you looking for short-term volunteer hours to fulfill a requirement for a class, court, etc.?	
<input type="checkbox"/> Long-term Volunteer	<input type="checkbox"/> Short-term Volunteer
	If short-term, how many hours do you need?
	When do you need to have the hours completed?



Appendix A

Please tell us about any special skills, qualifications, previous volunteer work you have done, or anything else you would like us to know.

Please list below the positions or type of work that you would like to do through volunteer work for the City of Crete:

Name & Contact Information for Emergency Contact:

Signature/Certification

I certify that all statements in this application are true. I also agree that if I am accepted as a volunteer, I will do my best to abide by all policies and procedures of the City of Crete.

Volunteer Signature: _____

Date: _____