

Applicant Signature



## **Volunteer Application**

☐ Park Worker	☐ Trail Volunteer	☐ Youth Vol	unteer	ark Docent	☐ Calico Volunteer		Camp/ Fishing outh Program	
			Applicant	Information				
ull Name:								
Last			First		M.I.			
ddress	at Address					A t t	41.21.11	
Stre	et Address					Apartment/	Unit #	
City					State	ZIP Code		
none:			Em	nail				
under the age of :	18, provide name and	telephone						
ımber of parent o	r legal guardian	Name			Phone	Phone		
hich park would y	ou like to work at:							
ave you ever serve egional Parks volu			es, list the location roximate dates	n and				
formation about r	•	history as an d	adult (age 18 and	-	nay be required to provide ctions are evaluated in a n		derstand	
			Previous E	mployment				
ompany:								
b Title:				Dates Empl	oyed:			
esponsibilities:								
ompany:								
b Title:	Dates Employed:							
esponsibilities:								
ompany:								
b Title:	Dates Employed:							
esponsibilities:								
			Hours of	Availability				
SHIFT	SAT	SUN	MON	TUES	WED	THURS	FRI	
AM PM	to	to	to	to	to	to	to	
				1				
standing; continuo	ous pushing and pullinaditional informational	ng; constant lift on, such as driv	ing of materials uver license and so	p to 25 pound	frequent reaching and ber ds and frequent lifting up to number to complete back are true and complete.	to 75 lbs.	-	

Parent or Legal Guardian Signature (if under 18)

Date