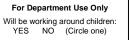
VOLUNTEER/INTERN APPLICATION

CITY OF OCEANSIDE

HUMAN RESOURCES DEPARTMENT 300 NORTH COAST HIGHWAY OCEANSIDE, CA 92054 760-435-3500

www.ci.oceanside.ca.us





	PEI	RSONAL INF	ORMATION			
Name:						
Address:	Last	First		Middle		
Address.	Number and Street	Apt. #	City	State	Zip	
Phone Number: Hom	ne ()	Cell	: () _	-	Ext	
Email Address:						
Do you have a valid California driver's license?					☐ Yes	□ No
Class Num	ber:	Exp.	Date			
Are you related to anyone who works for the City of Oceanside?					☐ Yes	□ No
If yes, Name: Relationship:					_	
Department:						
Do you speak/write any languages in addition to English?					☐ Yes	□ No
If yes, please specify the languages:						
Have you ever been convicted of a crime (Excluding minor Traffic Violations)?					☐ Yes	□ No
If yes, please explain:						
						<u></u>
EDUCATION AND SKILLS						
Highest grade completed (Circle one): High School 9 10 11 12 employment, or through other or sports. Summarize special skills you employment, or through other or sports.						
Are you attending school/college?						
EXPERIENCE AND AVAILABILITY						
Are you currently (Ch	neck One):					
☐ Student	☐ Employed full time☐ Retired	☐ Employe	•			
☐ Unemployed	□ Retiled	Other				
When are you available to volunteer (Check all that apply):						
☐ Morning	☐ Afternoon					
☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday						
Are you able to volunteer for: □ 1-6 months □ 6-12 months □ 1-2 years □ Ongoing						
- 1-0 IIIOIIIIIS	→ 0-12 IIIOHUIS	□ 1-2 year		- Origonity		

AREAS OF INTEREST						
Select one of the following: ☐ Volunteer ☐ Intern						
Will the volunteer/intern be driving for the City?						
Please check the area of City Government you would like to volunteer or intern in:						
☐ City Attorney ☐ City Clerk ☐ City Manager ☐ City Treasurer						
□ Development Services (□ Building, □ Engineering, □ Planning) □ Financial Services □ Fire						
□ Human Resource □ Information Technology □ Library						
☐ Neighborhood Services (☐ Code Enforcement, ☐ Housing, ☐ Parks and Recreation)						
□ Police (□ Harbor Police, □ Police Explorer, □ Senior Volunteer Patrol Program – S.V.P.P.)						
□ Public Works □ Water Utilities						
Please list any physical limitations that need to be accommodated to help you volunteer.						
How did you hear about volunteer opportunities at the City of Oceanside:						
☐ City Employee ☐ Community/Professional Organization: ☐ Human Resources ☐ Job Fair: ☐ School Placement/Career Center: ☐ Other:						
AGREEMENT AND SIGNATURE						
By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer or as an intern, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.						
In the event that I am accepted as a volunteer or as an intern for the City of Oceanside, I agree to comply with all its policies, rules and regulations. I fully understand and agree to provide my services to the City of Oceanside as a volunteer or as an intern in a volunteer capacity, and that I will receive no compensation or benefits for services provided.						
SUBMITTING AN APPLICATION DOES NOT GUARANTEE PLACEMENT. If accepted, I will undergo a background check which will include fingerprinting/livescan.						
BY SIGNING BELOW, I AGREE THAT I UNDERSTAND AND CONSENT TO THE ABOVE STATEMENT.						
Print Name:						
Signature: Date:						
If volunteer is under 18, signature of the parent/guardian is required (applicants must be 14 years of age to volunteer).						
Parent/Guardian Signature: Date:						