

Warminster Township
VOLUNTEER APPLICATION

Warminster Township values all of our volunteers and requests the following information to better match our volunteer's interests and experience with the programs and services we provide.

PERSONAL INFORMATION (Print)

Today's Date _____

Name _____ Cell Phone # (_____) _____
Last First Middle Init

Current Address _____
Street City State Zip

Current Phone (_____) _____ Email _____

Permanent Address _____
Street City State Zip

Permanent Phone (_____) _____ Are you 18 years or older? Yes No

Are you either a U.S. Citizen or an Alien authorized to work in the United States? Yes No

VOLUNTEER POSITION

Requested Position _____ Start Date _____

Areas of Interest

Please number items below in the order (1-10) in which you are interested, with '1' being what interests you the most and '10' being what interests you least.

- | | | | |
|-------|--|-------|--------------------------------------|
| _____ | Computers & Software | _____ | Summer Camps |
| _____ | Recreation programming /Instruction – All ages | _____ | Teen Programs |
| _____ | Special events (1 or 2 day) | _____ | Sport Groups |
| _____ | NAWC Development | _____ | Fund raising programs |
| _____ | Warminster Community Theatre | _____ | Grants writing & Foundation research |
| _____ | Youth Development & programming | _____ | Park Development |
| _____ | Public relations/marketing/advertising | _____ | Tree Ordinance/Inventory |
| _____ | Environmental Concerns/ Natural Trails | _____ | Friends of the Parks |
| _____ | Park Maintenance/ Gardening | _____ | Trip Chaperon |
| | | | Building Maintenance |
| | | | Art/ Music |

Please list previous experience related to desired interests _____

List teaching experience, if any _____

Why do you want to volunteer for Warminster Township? _____

Are you interested in long-term or short-term volunteerism? _____

Current FBI/State Police/Child Abuse Clearances are required for employment. Do you have? Yes No

Do you object to obtaining a FBI / State Police / Child Abuse clearances for a fee of \$55? Yes No

Do you have transportation to get to any recreation site? Yes No

Do you have current First Aid certification? Yes No CPR Certification? Yes No

If yes, please list the issuing agency & type _____

Do you have any Aquatics Certifications? Yes No

If yes, please list the type & issuing agency _____

Do you possess a CDL? YES NO Expiration Date: _____

Using each number **once**, please rate the following interests (1-6) with your skill level (#1 - the strongest, #6- the weakest.)

Crafts _____ Active/Passive Games _____ Sports _____ Nature _____ Performing Arts _____ Leadership _____

Which age group do you prefer working with? Preschool 5-10 11-14 15-17 18-25 26-40 40-55 55+
(Please circle one)

Do you have any special skills that may relate to maintenance and facility care? Yes No

If yes, please list _____

List any equipment that you have used related to the desired position _____

Education	Name & Location	# of years*	*Did you graduate	Subjects studied
High School				
College				
Other				

US Military Service? Yes No Member of the National Guard? Yes No

PHYSICAL RECORD

Do you have any physical limitation(s) that preclude you from performing any work for which you have volunteered?

Yes No If yes, please describe _____

If yes, what can be done to accommodate your limitation(s)? _____

In case of emergency notify _____ Phone _____

REFERENCES- Give the names of three persons, not related to you, whom you have known at least one year.

Name	Address	Phone	# years
1.			
2.			
3.			

"I understand that the facts contained in this volunteer application are true and complete to the best of my knowledge. I authorize investigation of all statements contained herein, and the references listed above to give you any and all information. I also release all parties from all liability for any damage that may result from furnishing same to you.

Signature _____ Date _____

Do Not Write Below This Line

Interviewed By: _____ Date: _____